

2019-2021

**Community Health Assessment and
Community Health Improvement Plan**

**Saratoga County
New York**

December 2019

Saratoga County



Public Health

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INTRODUCTION

Acknowledgements

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This document was written, using information from a variety of sources, including the Healthy Capital District Initiative (HCDI) and is a collaboration between Saratoga County Public Health Services (SCPHS) and Saratoga Hospital. Thank you to our public, private, and community partners for your ongoing involvement and support.

Mission & Vision

The Mission of Saratoga County Public Health Services: *Saratoga County Public Health Services is committed to assess, improve, and monitor the health status of our community, in order to:*

- *Prevent death, disease and injury;*
- *Promote healthy & safe practices;*
- *Protect against current and emerging threats to health and equity;*

to ensure that everyone has a fair and just opportunity to be healthy.

The Vision of Saratoga County Public Health Services: *A healthy Saratoga County where everyone and every community thrives today and into the future*

The Mission of Saratoga Hospital: *To serve the people of the Saratoga region by providing them access to excellence in healthcare in a supportive and caring environment.*

The Vision of Saratoga Hospital: *Saratoga Hospital will be the preeminent provider of the highest quality healthcare for Saratoga region residents.*

Executive Summary

The *Saratoga County 2019-2021 Community Health Improvement Plan* (CHIP) builds upon the *2019 Capital Region Community Health Needs Assessment* (CHNA), which resulted from a collaborative effort of Capital Region partners, including the region’s hospitals and local health departments, and the Healthy Capital District Initiative (HCDI). “Capital Region” refers to: Albany, Rensselaer, Schenectady, Saratoga, Columbia and Greene counties. This combined CHNA document can be found at http://www.hcdiny.org/content/sites/hcdi/2019_CHNA/2019_HCDI-Community-Health-Needs-Assessment.pdf.

I. Community Health Assessment (CHA) Data and Process of Review

HCDI compiled the majority of health indicator data reviewed during the 2019 CHNA process. They obtained the data from both publicly available and developed sources, including: SPARCS (hospitalizations and Emergency Department visits); Vital Statistics Data Portals used to generate county and zip code level analyses of mortality, hospitalizations, emergency room visits; Behavioral Risk Factor Surveillance System, Prevention Quality Indicators, the Siena College Research Institute Community Health Survey, and other sources. A more detailed description of data sources is found in the CHNA.

Saratoga County Public Health Services (SCPHS) and Saratoga Hospital convened a series of three Community Health Prioritization meetings in 2019 (January 23rd, February 26th and March 26th), open to the public, to which we invited community health, social and civic partners, including the Community Health Council, our local coalition of community partners with whom we engage on New York State Prevention Agenda goals. At the meetings, HCDI presented data and facilitated discussion that, ultimately, resulted in attendees submitting anonymous votes identifying their top two health priorities.

II. Prevention Agenda Priorities

The following two health priorities were selected to be the focus of the 2019-2021 CHIP:

- (1) **Obesity** – Obesity rates are high across many age groups in Saratoga County’s population; however, obesity rates in our County are particularly high among children under the age of 5. Thus, the 2019-2021 CHIP prioritizes interventions focused on decreasing obesity in very young children.
- (2) **Substance Use Disorder** – Although alcohol and other substances are impacting the health of our population, the substance that raised the most concern during the Prioritization Meetings was opioids and, particularly, the rise in fentanyl-adulterated opioids.

Geographic Disparity: Through the CHNA process, we identified the Northern rural reaches of our County, of which Corinth (zip code 12822) is the largest population center, as an area experiencing significant health disparities. With respect to substance use and obesity, the rate of opioid-related hospitalizations by Corinth residents was almost 2x higher than the County average (2012-16); Corinth has the highest proportion of children under the age of five of any municipality in our County; and hospitalization data for obesity and substance use related conditions consistently show that residents of Corinth suffer disproportionately when compared to the rest of Saratoga County.

III. [Partnerships and Community Engagement](#)

The entire process from the CHNA Prioritization Meetings to selecting the CHIP priorities and identifying interventions and strategies to address those priorities has and will continue to involve the collaboration of SCPHS, Saratoga Hospital and a wide range of partners. The Community Health Council, a coalition of community partners facilitated by Saratoga Hospital and SCPHS, meets quarterly and provides oversight and monitoring for activities under the CHIP. In those meetings, we identify strategies to address health priorities, provide progress updates regarding existing interventions, discuss challenges and receive input from the group. The Community Health Council is not a static body; new members are added whenever interest is expressed and meetings are open to the public.

In addition, we are working with existing subject-matter focused, County-wide coalitions to carry out specific interventions. Those coalitions include: the Maternal Infant Child Health (MICH) Coalition,

the Saratoga County Pre-diabetes Coalition, the Mental Health - Substance Use Disorder Coalition, the Neonatal Abstinence Syndrome (NAS) Subcommittee in which Saratoga County participates, and the Suicide Prevention Coalition of Saratoga County.

Finally, we have been holding a series of meetings with residents of the Corinth area to build a local coalition to address health disparities there. We started with a small focus group of residents, progressed to meetings with local government, then a group of community leaders, and finally a public forum, which has led to the creation of a working coalition, “Healthy Corinth.” Healthy Corinth is engaged in developing and implementing specific interventions for their community.

We aim for broad community engagement throughout the CHNA and CHIP process. All Prioritization Meetings, Community Health Council meetings, and coalitions described herein are publicized and open to the public. Council and coalition members are composed of a wide variety of community-based organizations, members of the public, and providers who work with diverse populations within our County (e.g., homeless, low-income) and can, therefore, provide some perspective from those populations. In addition, the Community Health Survey conducted by the Siena Research Institute for the CHNA provided direct input and data from Saratoga County residents and provided insight into the health needs, behaviors and barriers to care of Saratoga County residents.

IV. Evidence-based Interventions/ Strategies/ Activities

All implementation strategies, interventions, and process measures are detailed in the CHIP. Interventions selected are evidenced-based, and most strategies were suggested by the Action Plans that accompanied the *Prevention Agenda 2019-2024: New York State’s Health Improvement Plan*.

With respect to obesity, SCPHS is leading and/or facilitating the following evidence-based strategies: (1) promoting breastfeeding through organization of the first *Baby Café* in Saratoga County and increasing access to primary practices supportive of breastfeeding; (2) reducing food security and promoting greater consumption of healthy foods among those with food insecurity through healthy

food drives, assessing (with the goal of improving) food pantry ability to handle perishable foods, and developing a school garden in Corinth; and (3) increasing opportunities for physical activity through a *Safe Routes to School* program in Corinth.

SCPHS selected two evidence-based strategies to combat substance use disorders (SUD) include: (1) increasing access to Naloxone training and organizing prescription drug take-back days and permanent safe disposal sites in locations around Saratoga County with a high opioid burden; and (2) increasing awareness of NAS among providers and improving the transition to homecare.

Saratoga Hospital also has a clear plan to address obesity in the county. It is promoting a team-based approach (which includes pharmacists, community health workers, registered dietitians and other health workers) for obesity care to improve health outcomes. Specific programs include Bariatric Weight Loss and Breastfeeding. Saratoga Hospital is also working to improve worksite nutrition and physical activity through programs designed to improve health behaviors, such as improving healthy food choices in the cafeteria, hosting an employee wellness fair, and an employee wellness weight loss program. The hospital also promotes medical management in accordance with national guidelines for programs, such as diabetes prevention community education, medical nutrition therapy, and a nutrition prescription program. The hospital is working to expand access to self-management interventions through the diabetes self-management program; screen for food insecurity and support referrals through the Health Education Food Pantry program; and increase the availability of fruit and vegetable incentive programs through its Pitney Farms Program.

With respect to substance use disorder, Saratoga Hospital is building support systems to care for opioid users or those at risk of an overdose through a variety of programs, including Opiate initiatives of Saratoga Hospital; the Community Health Center Addiction Medicine Program; Eat, Sleep, Console Program; SUD and the Medication Assisted Treatment (MAT) Hospital-based Expansion Program. Greater detail is provided in the Hospital's 2019 Community Service Plan.

COMMUNITY HEALTH ASSESSMENT

Geography

Saratoga County is located in the eastern part of New York State, north of Albany, the state capital. It is considered part of the Capital Region and included in the Albany-Schenectady-Troy Metropolitan Statistical Area. Both the Hudson and Mohawk Rivers pass through Saratoga County, defining much of its eastern and southern borders. Another transportation corridor, the Adirondack Northway (I-87), bi-sects the County and provides connection ultimately to Montreal in the north and New York City in the south. The northern-most municipalities of Saratoga are in the Adirondack Park, making Saratoga County the gateway to the Adirondack Park and the Adirondack Mountains. According to the U.S. Census Bureau, Saratoga County is composed of 809.98 square miles with a population of 271 residents per square mile as of 2010 (U.S. Commerce Department, n.d.). Saratoga County has a mix of urban and rural areas, ranging from densely populated urban census blocks like those making up the City of Saratoga Springs (e.g., 3,910 persons per square mile) to sparsely populated areas, such as the Hadley/Day area census block with 30.2 persons per square mile, according to maps available from the Census Reporter.

Saratoga County in New York State



Transportation

In addition to the major transportation corridor for cars and trucks provided by I-87, Saratoga County also has five, relatively small public-use airports (Saratoga County Airport, Garnseys Airport, Heber Airpark, Plateau Sky Ranch Airport, and Round Lake Airport), as well as the Amtrak rail connection between the Saratoga Springs Amtrak Station and Albany, NY. Moreover, there is a heritage railway connecting the Saratoga Springs Amtrak Station to North Creek in the Adirondack Park, which is currently dormant. By and large, most residents of Saratoga County must rely on personal vehicles for transportation. Although there is CDTA bus service available in some parts of the County, it does not have routes in the Northwestern rural part of Saratoga and, where CDTA is in service, access depends on limited schedules and bus stop locations. Although there are some alternative, frequently needs-based transportations options, such as Medicaid cab or Circulation, available through much of the County, we are aware that a lack of Uber-type drivers and taxi companies in the more rural, northern parts of the County renders them generally unserviceable.

Culture & History

Saratoga County has numerous historical and cultural attractions. Historically, Saratoga is renowned for its pivotal role in the Revolutionary War involving two famous battles collectively known as the “Battle of Saratoga” that led to the surrender of British General John Burgoyne and his troops. Land on which the most important parts of those battles took place is now preserved as a park, The Saratoga Battlefield, a National Historical Park. Saratoga is also well known for its natural mineral springs that have been a source of health and wellness-related tourism for centuries as well as the Saratoga Race Course, one of the longest, continuously running horse racing venues in the country, founded in part by the maternal grandfather of Winston Churchill. Other attractions include the National Museums of Racing and Dance and the Saratoga Performing Arts Center (SPAC). Furthermore, institutions of higher education located in Saratoga County include Skidmore College, SUNY Empire State College, and a satellite location of SUNY Adirondack Community College.

Population Demographics

Saratoga County, with a population of 229,869, is the 2nd most populated county in the Capital Region, and the 3rd most urban (271.1 pop. /sq. mile) (U.S. Department of Commerce, n.d.). Saratoga County is New York State’s second fastest growing county and the only county in the Capital Region to which more people are relocating from other parts of the U.S. than are leaving (Crowe, 2019). Moreover, population growth is occurring across all age groups. In fact, Saratoga County has both the fastest-growing young (ages 18-34) and older adult (65+) populations in New York State (Center for Economic Growth [CEG], 2019; González-Rivera, Bowles, & Dvorkin, 2019). With a 4.4% increase in young adult population over the period 2014-18, Saratoga County now has the second greatest concentration (18.7%) of young adults among Capital Region counties (CEG, 2019). And, older adults make up a similar proportion of Saratoga County’s population at 18% (González-Rivera et al., 2019). Approximately 5% of Saratoga County’s population is under the age of 5 and a total of about 20% are under the age of 18 (U.S. Department of Commerce, n.d.).

Although the vast majority of Saratoga’s population remains white (93.0%), the percentage of people who identify as black (1.9%), Asian (2.9%), and Hispanic (3.2%) have all been growing since 2000 while the white population has been slightly declining (U.S. Department of Commerce, n.d.). Women make up just over half (50.5%) of our county’s population (U.S. Department of Commerce, n.d.). A relatively small portion of our population (5.3%) is foreign-born (U.S. Department of Commerce, n.d.).

Compared to state and national measures, Saratoga County residents tend to be better educated, have more employment, enjoy higher per capita and median household incomes, have greater access to the internet and computers, are more likely to have health insurance, and are less likely to live in poverty (U.S. Department of Commerce, n.d.). Of persons aged 25 and older, 93.9% have graduated at least from high school and 40.4% have a Bachelor’s Degree or more (U.S. Department of Commerce, n.d.). Saratoga County’s 2018 average unemployment rate of 3.5% was significantly below that of New York State (4.1%) (New York State Department of Labor, n.d.). The majority (66.3%) of residents aged 16+ are in the civilian labor force, the median household income is \$77,548 (2017 dollars), and per capita income is \$39,653 (2017 dollars) with just 6.6% living in poverty (U.S. Department of Commerce, n.d.). Most residents (71.5%) live in owner-occupied housing (U.S.

Department of Commerce, n.d.). The mean travel time to work for Saratoga County residents aged 16+ was 25.3 minutes (2013-17), which was the third longest commute of Capital Region counties behind Greene and Columbia (U.S. Department of Commerce, n.d.).

Most residents have health insurance with only 4.3% under the age of 65 reporting not having health insurance (U.S. Department of Commerce, n.d.). The percentage of residents under age 65 with a disability, at 7.6%, (2013-2017), is in keeping with New York State (7.5%) and significantly less than that of the U.S. (8.7%) (U.S. Department of Commerce, n.d.). Just over 88% of age-adjusted adults report having a regular healthcare provider (NYS Expanded Behavioral Risk Factor Surveillance System, data as of November 2018).

High risk/high needs areas within Saratoga County:

However, the wealth in Saratoga County is not spread evenly. According to a 2018 report issued by the Economic Policy Institute, Saratoga County ranks 3rd in the state with respect to the gap between rich and poor following New York City and Westchester County (Sommeiller & Price, 2018). Moreover, Saratoga County was in the top 30 of 3,061 counties ranked nationally in terms of income inequality (Sommeiller & Price, 2018). This gap between the haves and have not's is reflected in data collected by the New York State United Way ALICE Project, which shows that while the working poor and those in poverty account for just 15% of the population in Clifton Park, they make up the majority (53%) of Mechanicville's population with sizeable pockets of struggling people spread throughout the county, particularly in the northern rural areas (e.g., 47% of Day, 43% of Edinburg, 42% of Corinth) (United Way, 2019). Women of childbearing age make up the largest group of people living in poverty in Saratoga County (Data USA, n.d.).

For this CHIP period, we are focusing particularly on Corinth, which is located in the North West rural region of Saratoga County that suffers from significant health disparities. Corinth scores poorly on just about every indicator for socioeconomic status. For instance, a total of 42% were found by United Way to have incomes that place them either in poverty or among the working poor (United Way, 2019). Similarly, the North West Neighborhood of Saratoga County (Corinth, Day, Hadley) ranks as the neighborhood with the highest socioeconomic need in our County under three other socioeconomic indices: Area Deprivation Index – 94.8 score, 42nd percentile; SocioNeeds Index – 32.5 out of 100; and Common Ground Socioeconomic Status – 3 out of 5.

Corinth's estimated population of 6,457 makes up about 3% of Saratoga County's population and is the most populous municipality in the northern, rural section of the county (U.S. Department of Commerce, n.d.). With 7.7% of its residents under the age of 5 and just over a total of 23% under the age of 18, Corinth has the youngest relative population and highest proportion of children under the age of 5 of any municipality in Saratoga County (U.S. Department of Commerce, n.d.).

Corinth has the highest relative proportion of residents under the age of 65 with a disability (14.3%) of any municipality in Saratoga County compared to 7.6% county-wide (U.S. Department of Commerce, n.d.). Corinth also has the second highest proportion of Veterans of any municipality in Saratoga County at 9.5%, which is higher than the County proportion of 7.0% (U.S. Department of Commerce, n.d.). However, despite the large number of veterans, a higher proportion of Corinth residents under the age of 65 lack health insurance (5.8%) than Saratoga County generally (4.3%) (U.S.

Department of Commerce, n.d.). Perhaps as a result, Corinth had the second highest percentage (5.2%) of births (5.2%) for which there was either late or no prenatal care, second only to Hadley (7.5%), according to 2014-16 New York State Vital Statistics Data as of June, 2018.

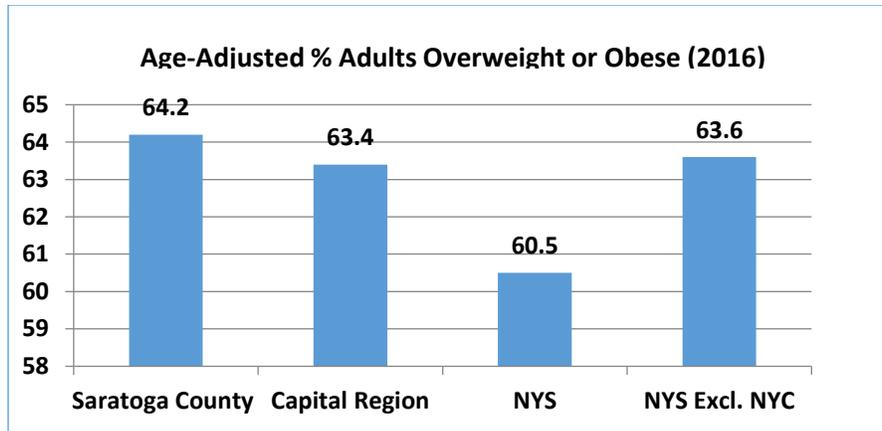
Corinth has the lowest high school graduation (86.8%) and post-high school education rates (18.4%) of any Saratoga County municipality (U.S. Department of Commerce, n.d.). Its school district, the Corinth Central School District, serves 1,196 (2017-18) K-12 students (NYS Education Department, 2018). The percent of households in Corinth with a computer at 88.2% is lower than the County average of 91.4%, and the percent of households with a broadband internet subscription at 76.8% is the lowest percent of any municipality in Saratoga County (U.S. Department of Commerce, n.d.).

Health Status of Saratoga County Residents

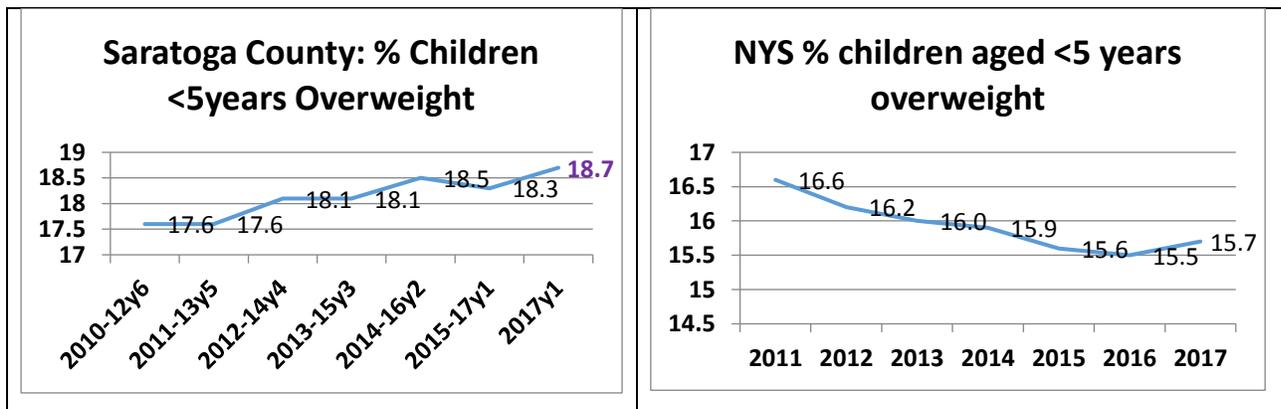
Overall, Saratoga County's residents are healthier than most of their counterparts in the rest of New York State. In fact, County Health Rankings and Roadmaps, a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, has ranked Saratoga County in the top 5 of all 62 counties in New York State since the program's inception in 2010 (see, <http://www.countyhealthrankings.org/>). For 2019, Saratoga County ranked 4th in the state for health outcomes and factors. Nonetheless, there are areas in which Saratoga County can improve. For example, the top three areas identified in the 2019 rankings for improvement were: adult smoking, adult obesity, and excessive drinking. Furthermore, our Community Health Assessment process revealed a number of other areas in which Saratoga County's performance with respect to New York State Prevention Agenda indicators is either poor or evidences need for improvement:

Obesity:

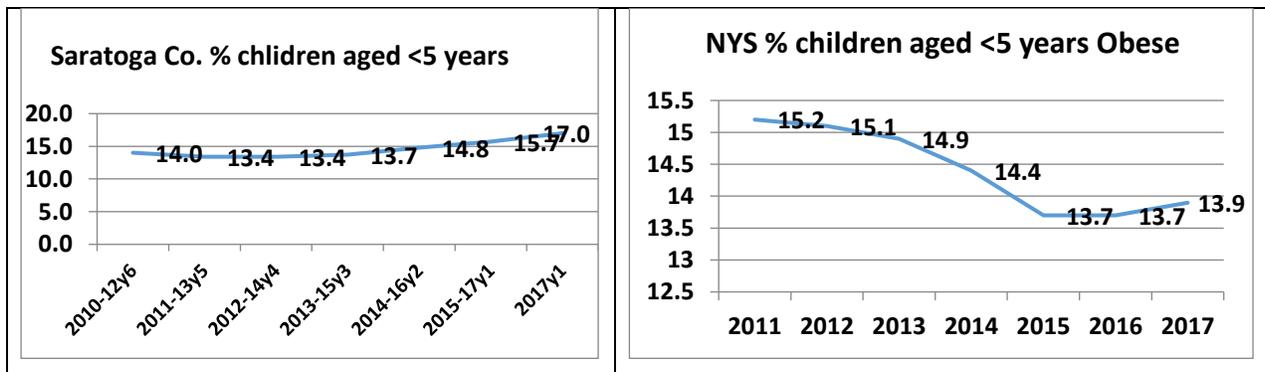
As demonstrated in the chart below, a higher percentage of Saratoga County adults are either overweight or obese than adults in New York State, New York State excluding New York City, or the Capital Region. Similarly, the percent of Saratoga County children under the age of five who are either overweight or obese is greater than children in that age group in New York as a whole. Even more concerning is the fact that while overweight and obesity trends for children under the age of five in New York State have been falling somewhat since 2010; they have been steadily rising for children in Saratoga County. Related thereto is the fact that food security in Saratoga County is worsening based on data from the USDA Food Environmental Atlas showing that the percentage of Saratoga County residents with low income and low access to a supermarket or large grocery store has increased from 3.9% in 2010 to 4.0% in 2015. In addition, 8.8% of Saratoga County's population reported in 2015 not having access to a reliable source of food during that year according to 2015 Map the Meal Gap Data (data as of June 2018) and 7.9% of Saratoga households were receiving food stamps/SNAP benefits in the past 12 months over the period of 2012-16 according to the U.S. Census American Community Survey Data as of June 2018.



Source: NYS Expanded Behavioral Risk Factor Surveillance System, data as of January 2019.



Source: New York State Pediatric Nutrition Surveillance System Annual Reports 2010-12 to 2017



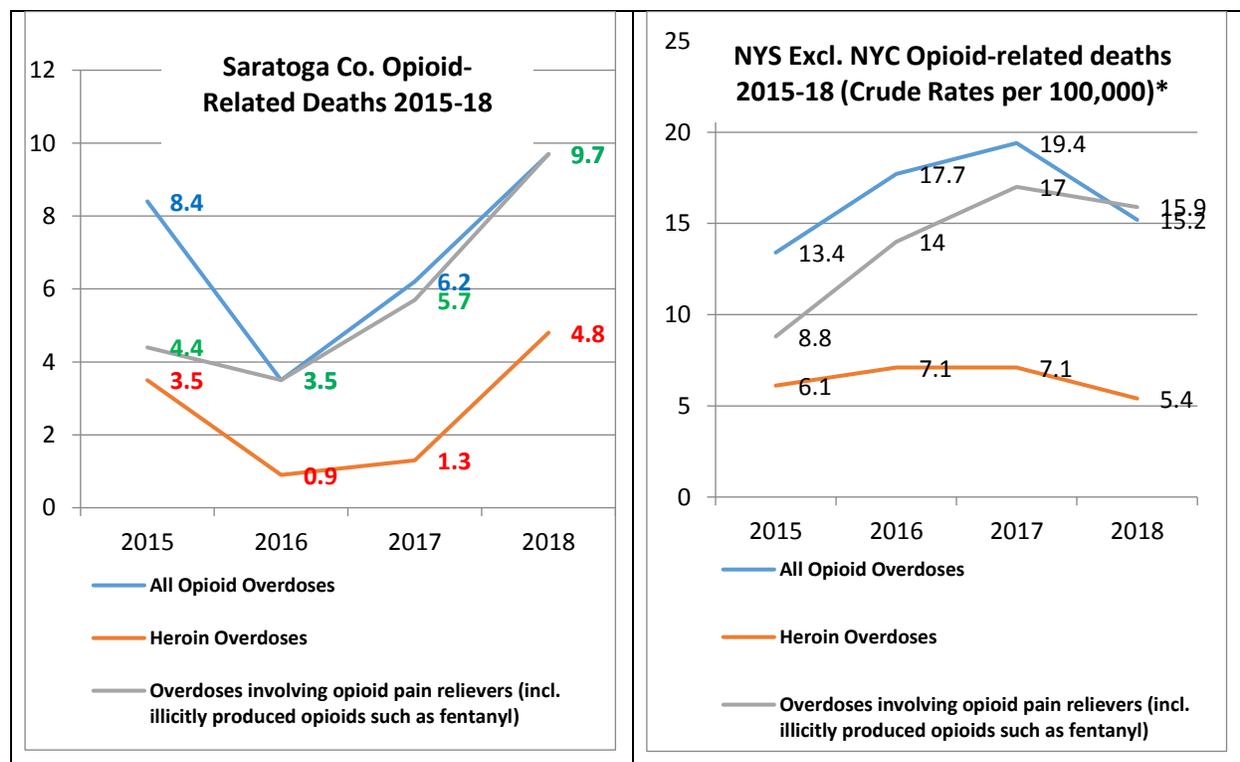
Source: New York State Pediatric Nutrition Surveillance System Annual Reports 2010-12 to 2017

Breast Cancer:

Although, based on Cancer Registry data as of May 2018, the 2014-16 age-adjusted female breast cancer incidence and mortality rates per 100,000 for Saratoga County residents at 133.6 and 16.8 were lower than that of New York State excluding NYC (140.1 and 17.0, respectively), Saratoga County's age-adjusted late stage female breast cancer incidence rate per 100,000 was notably higher (45.9) than New York State excluding NYC (43.9) (New York State Department of Health, 2019). This apparent delay in diagnosis may be related to the lower percentage of Saratoga County women aged 50-74 receiving breast cancer screening than women of New York State as a whole (77.9% vs. 79.7% in 2016), according to the New York State Expanded Behavioral Risk Factor Surveillance System (data as of November 2018).

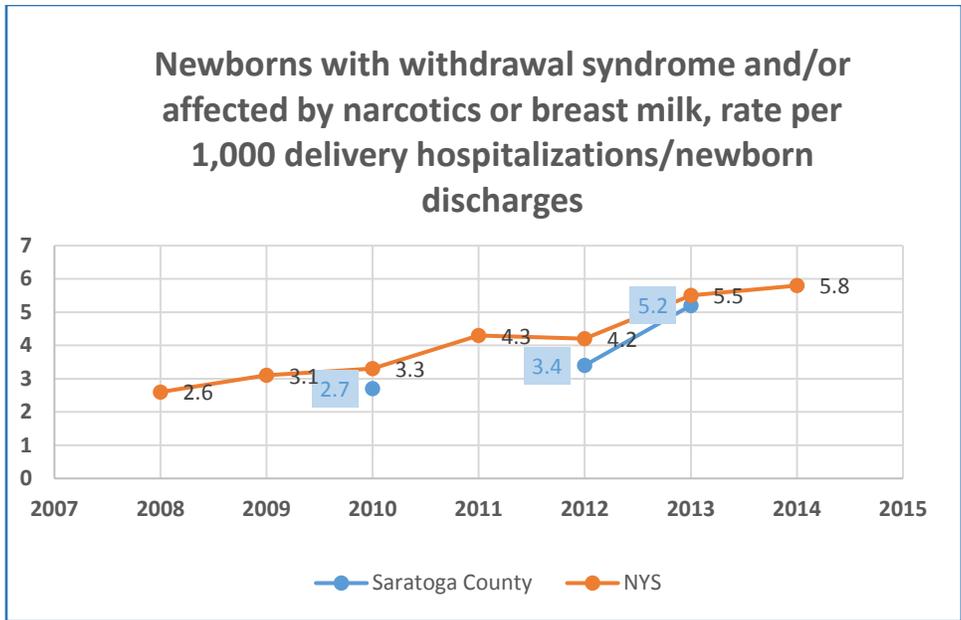
Substance Use Disorder:

Although there is data showing that alcohol and other substances are impacting the health of our population, the substance that raised the most concern during the Prioritization Meetings was opioids and, in particular, the rise in fentanyl-adulterated opioids. As the graphs below demonstrate, notwithstanding the fact that Saratoga County overall has experienced a lower level of opioid misuse than much of the rest of New York State, while trends in New York State are beginning to show progress in reducing opioid-related deaths, Saratoga County's opioid-related deaths continue to increase. Concomitantly, Saratoga County has also experienced a steady increase in newborns diagnosed with Neonatal Abstinence Syndrome or other withdrawal-related conditions.



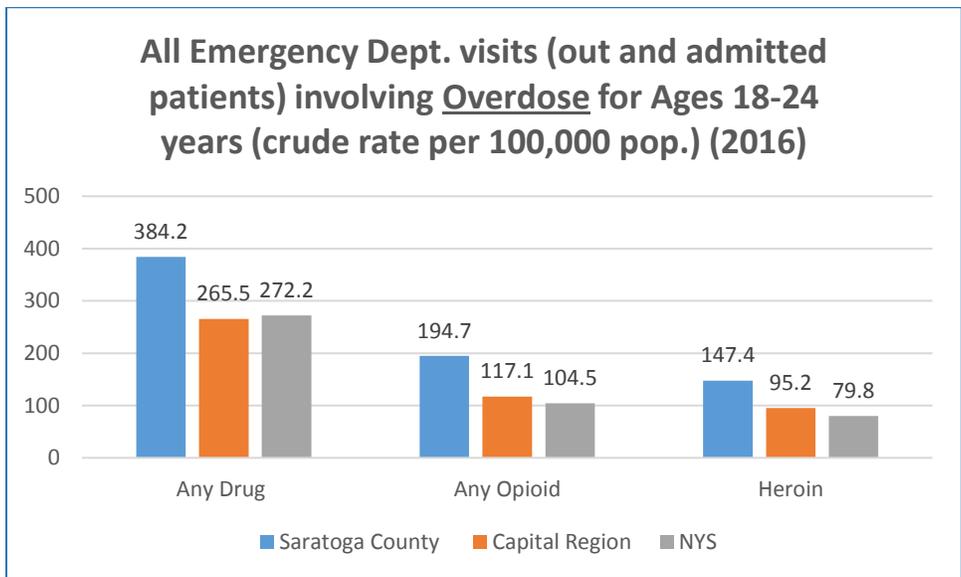
*Preliminary Data as of May 2019, subject to change.

Source: NYS DOH. (2017). New York State- County Opioid Quarterly Report for Counties Outside New York City.



Source: SPARCS as of August 2017.

Moreover, the rate of drug-related overdose Emergency Department visits is actually higher among Saratoga County's young adult (aged 18-24) population than either New York State or the Capital Region.



Source: SPARCS data as of December 2017.

In terms of geographic disparities, two zip codes in Saratoga County consistently exhibit a higher degree of opioid impact than the rest of the County: 12822 (Corinth) and 12170 (Stillwater). For instance, while the crude rate per 100,000 (2016) measuring the opioid burden in terms of opioid overdose deaths, non-fatal outpatient emergency department and hospitalization discharges involving

opioid abuse, poisoning, dependence, and unspecified use for Saratoga County as a whole is 242.7, zip code 12170 was 565.1 and zip code 12822 was 441.0, according to Vital Statistics and SPARCS data as of May 2018). As a result, both of those zip codes are in the 4th quartile (meaning worst performing 25%) of all upstate NYS excluding NYC zip codes with respect to opioid burden. Similarly, the 2016 crude rate per 100,000 of unique clients admitted to OASAS-certified chemical dependence treatment programs for any opioid shows a corresponding trend with a total rate of 241.3 for Saratoga County but higher rates for zip codes 12170 (295.1) and 12822(279.6), which places both zip codes in the 3rd quartile (worst performing 50%) of all upstate zip codes, according to OASAS data as of April 2018 (New York State Department of Health, 2019).

Smoking:

Although no trend data is currently available, the 17.3% of age-adjusted adults who were current smokers as of 2016 according to the New York State Expanded Behavioral Risk Factor Surveillance System (data as of November 2018), is significantly higher than the 14.5% of age-adjusted adults for New York State as a whole. However, Saratoga's performance is, nonetheless, in line with the Capital Region for which 17.5% of age-adjusted adults were found to be current smokers. Furthermore, while Saratoga County's age-adjusted lung and bronchus cancer incidence and mortality rates per 100,000 for 2013-15 at 74.4 and 50.6 respectively were higher than that of New York State as a whole (59.2 and 36.9), our County's rates are more in line with the Capital Region (74.8 and 46.3), based on Cancer Registry Data as of May 2018.

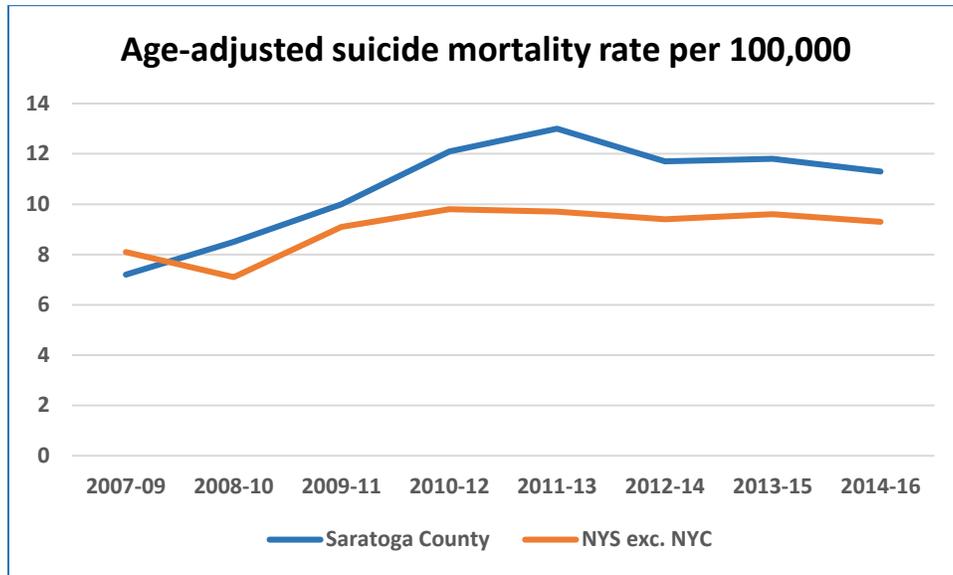
Excessive Alcohol Consumption:

The 24.0% of age-adjusted adults reporting having engaged in binge-drinking during the past month in 2016 according to the New York State Expanded Behavioral Risk Factor Surveillance System (data as of November 2018) was significantly higher than the 18.3% reported for New York State as a whole or 18.1% reported by residents of the Capital Region. Unsurprisingly, Saratoga County's alcohol-related motor vehicle injury and death rate of 48.6/100,000 for 2014-16 was also much higher than that of New York State at 29.9/100,000 or the Capital Region at 41.9/100,000. So, too, was the age-adjusted cirrhosis mortality rate of 8.3 per 100,000 in Saratoga County (2014-16) versus 6.8 for New York State and 8.1 for the Capital Region, based on May 2018 data from Vital Statistics. Moreover, based on a map created by HCDI using data from the 2016 US Census Bureau, Cornell University Geospatial Information Repository, Common Ground Health, State Planning and Research Cooperative System (SPARCS), and NYS Vital Statistics Data, the Saratoga County zip codes with the highest cirrhosis mortality rates (2012-16) were the North West (16.5), South Glens Falls (14.8), and North East (11.2).

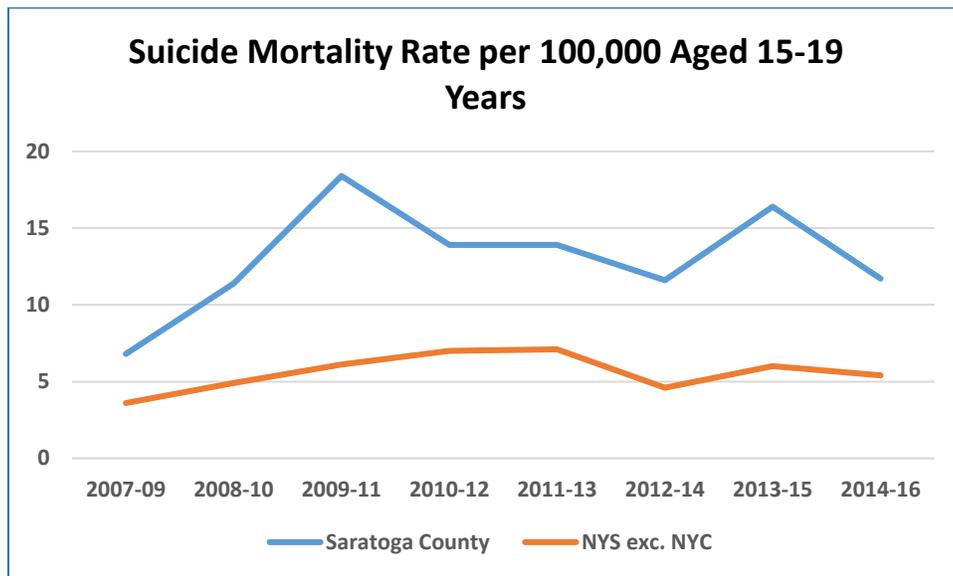
Suicide/Self-inflicted injury:

Based on Vital Statistics data as of May 2018, Saratoga County continues to have an age-adjusted suicide mortality rate that is much higher than rest of New York State excluding New York City, as shown in the trend graphs below. The suicide mortality rate of Saratoga County youth aged 15-19 is particularly high. However, the 2016 age-adjusted self-inflicted injury hospitalization rate per 10,000 for

Saratoga County residents of all ages (3.9) and those aged 15-19 years (7.0) were below that of New York State excluding NYC (4.2 and 8.7) based on the SPARCS data from December 2017.



Source: Vital Statistics as of May 2018



Source: Vital Statistics as of May 2018

Asthma:

Although Saratoga County has a much higher percentage (15.4%) of age-adjusted adults with current asthma than the Capital Region (12.9%) or New York State (9.6%), our County’s asthma hospitalization and mortality rates are generally well below that of the Capital Region and New York State. The high incidence of asthma may be related to higher levels of air pollution in Saratoga County

as compared to much of the rest of New York State. Based on 2014 data, Saratoga County had a relatively high average daily density of fine particulate matter in micrograms per cubic meter (PM2.5) of 9.4 vs. 8.5 in New York State overall, according to the CDC's National Environmental Public Health Tracking Network. According to data collected by HCDI, the North West neighborhood had the highest asthma-related Emergency Department visit rate (39.0) for the period of 2012-16 of all neighborhoods in the County.

Falls-related injuries:

Overall, Saratoga County's falls-related hospitalization rates are below that of New York State and the Capital Region. However, Saratoga's falls hospitalization rate per 10,000 for younger people aged 15-24 in 2016 was somewhat higher at 6.1 than that of the Capital Region (4.8) and New York State (4.8), based on SPARCS data as of December 2017. Moreover, according to data provided by HCDI, the elderly (65+) falls-related hospitalization rates were 1.2 times higher in both the Ballston Spa and Saratoga Springs neighborhoods than the rest of the New York State excluding NYC. HCDI also reported that the pediatric (1-4 years) fall-related Emergency Department visits were 1.4 times higher in the North East neighborhood than that of New York State excluding NYC.

Mental Health:

Overall, mental health indicators for Saratoga County residents were better than or comparable to those of the Capital Region and New York State. However, based on data provided by HCDI, the South Glens Falls neighborhood had mental disease and disorder Emergency Department visits and mental disease and disorder hospitalization rates that were 1.3 and 1.5 times, respectively, higher than New York State excluding NYC.

In addition, according to data from the OASAS HOPE line Annual Report dated November 1, 2017-October 31, 2018, residents of Saratoga County made up the second highest call volume in the Northeast Region, which is made up of 15 New York State counties (Iyler, 2018). Of those calls, the vast majority were seeking assistance with problem gambling.

Lyme Disease:

With an incidence rate per 100,000 of 146.7 (2012-14) for Lyme Disease, Saratoga County is in the 4th quartile (worst 25%) of New York State Counties for Lyme Disease incidence, based on data from the Bureau of Communicable Disease Control (data as of April 2016).

Teen Pregnancy:

Although Saratoga County has lower adolescent pregnancy (15-17 years) rate than either the Capital Region or New York State, according to data provided by HCDI, the North West neighborhood's rate was 1.1 times that of New York State excluding NYC.

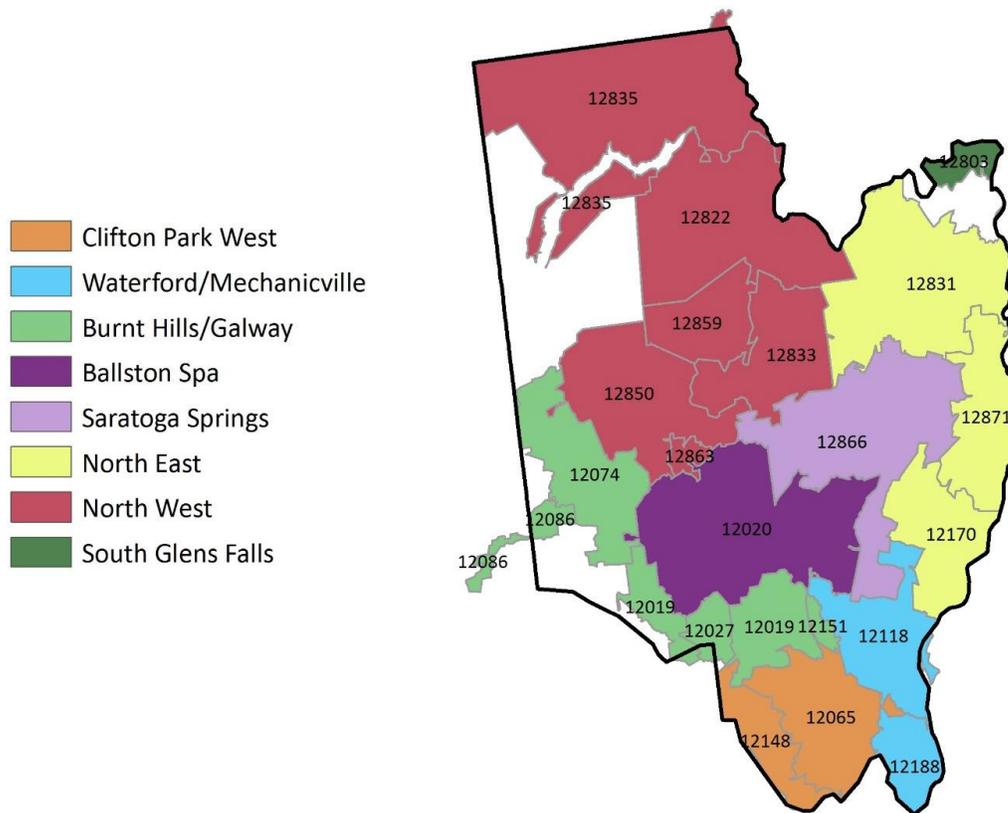
Prenatal Care:

According to data provided by HCDI, while Saratoga’s late or no prenatal care rate of 3.4% was lower than NYS excl. NYC (4.4%), South Glens Falls neighborhood had 1.1 times the rate of late or no care compared to NYS excl. NYC.

Sexually Transmitted Disease:

According to data analysis provided by HCDI, while Saratoga’s gonorrhea and chlamydia case rates were lower than NYS excl. NYC, the gonorrhea rate has increased 260% and chlamydia increased 28% from 2013 to 2017.

Saratoga County Neighborhoods Map



Main Health Challenges of Saratoga County:

Challenges impacting the health of Saratoga County residents include, but are not limited to:

Environmental Risk Factors:

Saratoga County is frequently called the “Gateway to the Adirondacks.” In the middle and southern ends of the County, Saratoga is very much part of and shares similarities with the more urban

and suburban areas of the Capital District. However, Saratoga County's northern end is mountainous, largely rural, and has a good portion located within the "blue line" of the Adirondack Park, which has historically been synonymous with limited/restricted development and poverty. Thus, there is a significant North/South divide within Saratoga County in terms of needs, resources, and culture.

Complicating the North/South divide is the fact that agriculture has long been a part of the landscape throughout Saratoga County. Thus, interspersed throughout the County are rural areas that, once again, have needs and resources that often contrast with the more urban parts of the County.

Transportation is a barrier to many, both for health-related and work-related demands. The only public transportation option is CDTA buses that operate in only a portion of the County. In particular, there are no bus routes in the Northern portion of the County at all. Taxi, Uber and other car services are also primarily limited to the more populated southern and middle parts of the County. As a result, the alternative "social determinants" transportation options that rely on car services to do the actual transporting are not accessible in the Northern part of our County.

Many of the current solutions to transportation barriers, such as Uber, are rendered impractical by the lack of reliable, low-cost internet and cellular service throughout much of the mountainous northern parts of the County and other, rural pockets throughout the County. Lack of cell service means that customers and car services cannot transact in those areas. This communication barrier also compromises telehealth solutions for rural areas. For example, the Center of Treatment Innovation (COTI) Project has stated that spotty cell service and dead spots make it difficult to provide reliable services to people in the Corinth area and prevent them from locating their mobile van there despite the fact that Corinth has a high opioid burden. Furthermore, the decline of print media when combined with the lack of connectivity has resulted in no commonly accepted forums for communication in the Northern part of the County, which has led to a sense that the community is fraying. Finally, the lack of connectivity places those communities at an economic disadvantage and limits educational opportunities for their residents.

Food insecurity is another significant and growing problem in Saratoga County. As noted previously, food insecurity across the entire county is rising. In addition, the USDA has identified two food deserts in Saratoga County made up of low income census tracts where a significant number or share of residents live either more than 1 mile in urban areas or more than 10 miles in rural areas from the nearest supermarket (USDA, Economic Research Service, 2017). The food deserts are located near the Town of Stillwater (Tract 36091062100) and in a large expanse between Ballston Spa and Galway (Tract 36091061401) (USDA, Economic Research Service, 2017).

As noted herein, Saratoga County suffers from poor air quality in the form of high concentrations of particulate matter, which likely contributes to a range of negative health impacts, such as asthma. In fact, federal funds currently available to New York State through the Congestion Mitigation and Air Quality Improvement Program (CMAQ) is currently (2018-2020) available to only 19 counties of which Saratoga is one in recognition of the poor air quality. CMAQ will only fund transportation projects that reduce vehicle emissions and/or traffic congestion in areas that do not meet National Ambient Air Quality Standards.

Behavioral Risk Factors:

The higher rates of excessive alcohol consumption and alcohol-related traffic accidents in Saratoga County are likely influenced by the tourist economy that predominates in our area. Sober messages and lifestyles are harder to encourage and maintain in an atmosphere that promotes celebrating with alcohol.

Another behavioral risk factor affecting our population is a relatively lengthy commute. With a mean travel time to work of 25.3 minutes for those 16+ (2013-17), many of our residents lack the time and opportunity to engage in physical exercise. Moreover, lengthy commutes compound other life stresses, such as childcare, time for food preparation, and socializing.

Socioeconomic Factors

The significant income inequality described previously herein presents many health-related problems from increasing the cost of some health services, preventing qualification for certain government programs that could improve access to care, and increases the cost of living for all residents, stretching their ability to maintain a healthy home and lifestyle. For instance, Saratoga County does not qualify as a health professional shortage area with respect to dental or mental health providers, which designation can assist in obtaining access to technical assistance and grant funding for health programs. However, many of the dental and mental health providers in our County are concentrated in the more urban areas and, frequently, operate on a cash-only basis and/or restrict the type of insurance they accept, making dental and mental health care out of reach for a good portion of our community.

Affordable housing is a growing problem in Saratoga County. By and large, Saratoga County residents live in owner-occupied homes. According to the U.S. Census Bureau, 71.5% of Saratoga County residents (2013-17) live in owner-occupied homes compared to just 54.0% statewide, and the median value of those homes is \$243,600. Because of the dominance of owner-occupied home, there is a dearth of other options (e.g., apartments) that permit alternative forms of living that can accommodate a wider range of needs, abilities, and financial circumstances. According to the 2019 County Health Rankings data, 12% of our residents (2013-17) spend 50% or more of their household income on housing, compared to just 7% of top U.S. performers. Due to overwhelming demand, the Saratoga Springs Housing Authority (SSHA) has had to close its wait lists for public housing and Section 8 assistance. Increasingly, more of our County's middle and lower income residents are being pushed out of the more urban areas in our County to the less rural areas where housing is cheaper. Unfortunately, the influx of lower income residents are taxing areas that already suffer from transportation barriers, lack of employment opportunities, and insufficient social services. Moreover, urban areas of the County, such as the City of Saratoga Springs, have experienced a noticeable increase in homelessness.

The Corinth area, which we have identified as suffering from significant health disparities, has yet to find its footing after the loss of its primary employer, the Hudson River Mill in 2002. The Hudson River Mill was International Paper Company's flag ship mill and principal office for much of the 20th century and was reportedly the largest employer north of Albany at its height in the 1960s when it employed approximately 1,700 people. After the mill closed in 2002, International Paper subsequently dismantled most of its buildings in 2011, which led to a large loss of property tax revenue for the local municipality. The Village of Corinth then suffered another loss in 2009 when a fire swept through

several key buildings on Main Street, which has led to further loss of real property tax revenue, loss of key businesses that contributed to the local economy, and vacant property that acts as blight on downtown.

Policy Environment:

While a few communities in Saratoga County (e.g., Saratoga Springs, Clifton Park) have invested resources in aligning their policies and operations with recommendations that enable them to become climate smart, age-friendly, complete streets, etc., most municipalities in Saratoga County have not done so. As a result, they may not benefit from the most up to date concepts in terms of land use, governance, and organization that could benefit their residents and their health. Moreover, the lack of certification could impact future eligibility for funding for community projects in those municipalities. Limited resources at the municipal level, particularly in smaller and more rural communities, are likely responsible for this circumstance. Related thereto, a number of towns and villages have had to reduce services (e.g., close local police departments) and/or have always lacked some services like local parks and recreation departments, which reduce the number of partners in those areas with whom public health can team up to advance interventions.

Other unique characteristics that contribute to health status:

In addition to internal differences within Saratoga County that have, in part, led to a difference in health status between the south/middle and northern part of our County, many external program service areas bi-sect Saratoga County in a similar way that exacerbates these differences and, sometimes, lead to reduced services across the County. For example, there are three DSRIP Performance Provider Systems (PPS) in Saratoga County: Adirondack Health Institute, Inc. (AHI) operating in the north and Alliance for Better Health Care, LLC and Better Health For Northeastern New York, Inc., both of which operate in the middle/south of the County. The assistance programs offered by each PPS vary considerably, meaning that services available are dependent on the zip code of our residents. Moreover, for all three PPS, Saratoga was at the outer edge of their service areas, meaning that some services never got up and running in our area since it was outside of their main focus area. Similarly, the OASAS funded Center of Treatment Innovation (COTI) program designated to serve Saratoga, Montgomery and Schenectady Counties has focused most of its attention on the southern portion of Saratoga County, which is nearer the other two counties in its service area. However, some of the greatest need in Saratoga County for recovery services is in our northern region. Finally, while the northern part of the County has traditionally looked to the Glens Falls Hospital System for much of its health care needs, the middle and southern portions of the County have traditionally been served either by Saratoga Hospital or other more southern hospital systems like Ellis, St. Peter's, Albany Medical Center, etc. In recent years, Glens Falls Hospital has undertaken a contraction of services, particularly mental health and addiction services, which has negatively affected the Northern parts of Saratoga County, which already have overall greater disparities in those and other aspects of health.

Assets and Resources

After choosing obesity and substance use disorder as the two CHIP priorities, SCPHS and Saratoga Hospital have been working with our local coalition of community partners with whom we engage on

Prevention Agenda goals, the Community Health Council, which meets quarterly, to formulate specific plans. In addition, we have been discussing our CHIP priorities with specific partners and existing coalitions whose interests and activities align with our goals.

For instance, because our CHNA revealed that obesity rates in our County are particularly high among children under the age of 5, we have been working on promoting breastfeeding through our Maternal Infant Child Health Coalition (MICH) and its Breastfeeding Subcommittee. On another front aimed at increasing food security, which our assessment found is worsening in Saratoga County, we are working with a pre-existing Pre-diabetes Coalition to promote food drives with an emphasis on healthy food donations and a new coalition of food pantries that is being organized by our CHIP partner, Saratoga Hospital through its Community Health Center, to improve the ability of food pantries to receive, store and disseminate perishable foods.

We are also working with various coalitions in which our Prevention Agenda partners participate to address substance use disorders. Through the Mental Health and Substance Use Disorder Coalition, which was founded during the last CHNA/CHIP cycle, among other things, we are focusing on promoting harm reduction. Thus far, we assisted in organizing and implementing a county-wide NARCAN Day on August 30th 2019 that distributed Narcan and provided training at 10 different locations throughout the day, including a location in Corinth. We are also exploring whether it would be appropriate to install syringe disposal kiosks at key locations around the County. Moreover, since, 2018, SCPHS and Saratoga Hospital have been participating in the Warren & Washington County Neonatal Abstinence Syndrome (NAS) Subcommittee, a collaborative team of health care providers and human service partners, through which we have been working, along with Saratoga County Department of Social Services (DSS), to establish a plan of safe care and increase education for providing a successful transition to their homecare. We are also including the MICH Coalition Substance Use Disorder (SUD) Sub-Committee in our NAS efforts and expanding their scope to consider how to better assist pregnant women with SUD prior to birth. Furthermore, we continue to work with the Suicide Coalition that SCPHS co-leads with the Department of Mental Health & Addiction Services, to reduce suicide deaths and promote positive mental health.

In addition, because the CHNA revealed significant health disparities in the Northern part of our county centering on the Town and Village of Corinth, we have been holding a series of meetings with residents to build a local Corinth coalition to address health disparities with a particular focus on obesity and substance misuse. Thus far, we have held six meetings with Corinth, starting with a small focus group of residents, progressing to a meeting with the Town Supervisor, then a group of community leaders, and finally a public forum, which has led to the creation of two work groups, one for obesity and another for substance misuse, that are meeting separately. Recently, SCPHS met with the Corinth Central School District (CSD) and will join the school Wellness Committee through which we plan to develop those projects that our Obesity and SUD Work Groups have identified as priorities and which involve the school (e.g., School-Community Garden, *Safe Routes to School*, etc.).

Finally, during the review process for the CHNA, SCPHS and Saratoga Hospital updated our comprehensive list of assets and resources. This list can be found under Appendix A: Assets and Resources – Obesity and Appendix B: Assets and Resources – Mental Health and Substance Use Disorders.

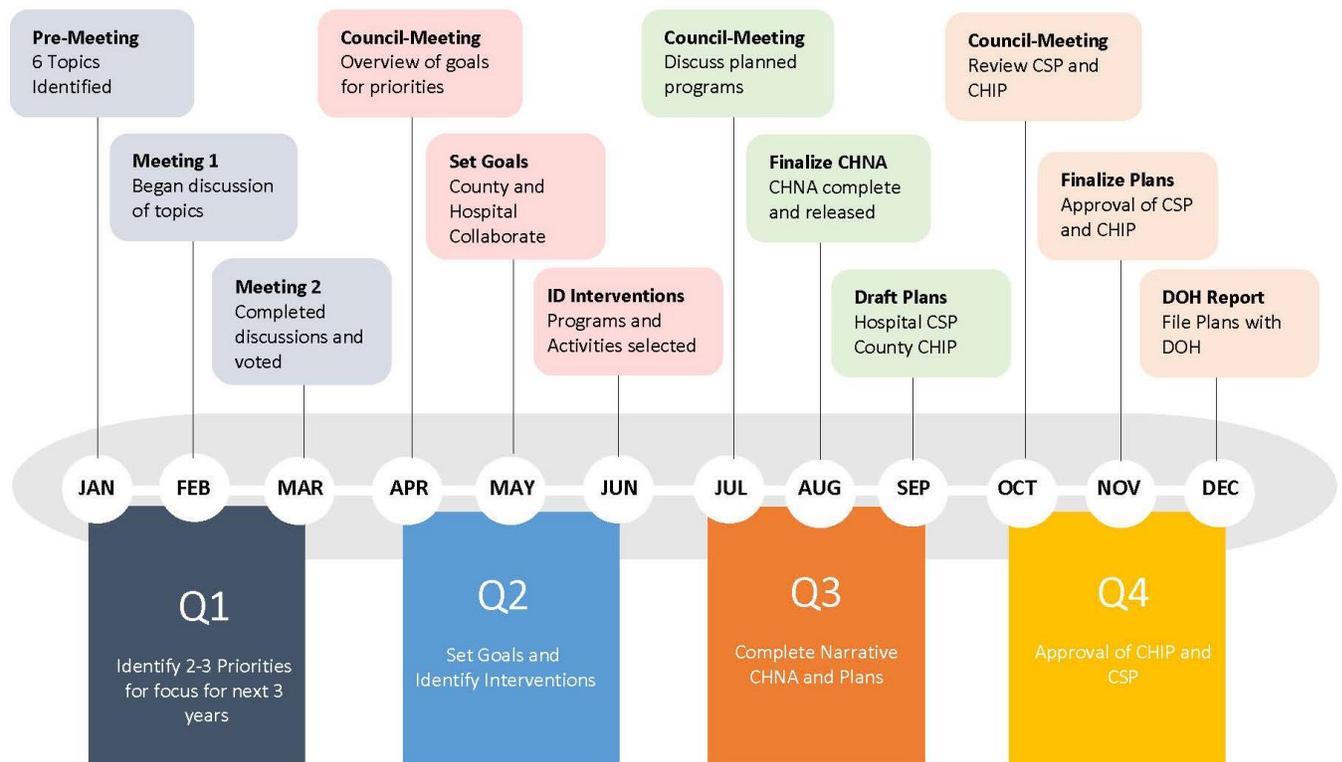
COMMUNITY HEALTH IMPROVEMENT PLAN

Prioritization Process

Selection of the top health priorities for Saratoga County was based on a multi-year process building on existing knowledge from present Community Health Improvement Plan/Community Service Plan implementation efforts, as well as the 2015 Medicaid Delivery System Reform Incentive Payment (DSRIP) Needs Assessment. Saratoga Hospital and SCPHS collaborated to guide the 2019 Public Health Prioritization process and Plan development.

With participation from HCDI, four special Council meetings were held in the winter/spring of 2019. Council members were asked to participate in the assessment process by attending a series of meetings in which data was presented and discussion took place that resulted in consensus about what the most pressing health needs currently are for the community. Saratoga Hospital, SCPHS and other community-based organizations will focus their efforts over the next three years on addressing these identified needs.

2019 Plan Development Timeline Community Health Improvement Planning



The Council meetings as outline in the timeline above were held at Saratoga Hospital. Below are the schedule and a brief description of each meeting:

Prioritization Meeting I Goal: Data Analysis

This meeting was held in lieu of the first quarterly meeting for 2019 and was devoted to taking a very in-depth look at all the relevant health indicator data that HCDI compiled. The goal of this meeting was to do a “first cut” on the very copious and varied data. This group focused on what was to be presented to the larger group to inform and stimulate discussions at future meetings.

Ninety (90) health indicators across the five Prevention Agenda Priority Areas were analyzed. From those health indicators 30 Health Topics were selected and 13 were then reviewed in more detail. Available data on prevalence, emergency department visits, hospitalizations, mortality and trends were included for each indicator. Equity data for gender, age, race/ethnicity, and neighborhood groupings were presented as available. After the presentation, these data were made available to Capital Region partners on the HCDI website (<http://hcdiny.org/>).

The results from this meeting were based on the quantitative analysis for the various indicators which showed the following health needs merited further examination by the full Council:

- Obesity
- Smoking
- Breast Cancer
- Suicide/Self-inflicted injuries
- Drug Use
- Alcohol Use

Prioritization Meeting II Goal: Group Discussion

This meeting included an overview of the data summary from the January meeting which was followed by a facilitated discussion of these findings. The goal was to give context and qualitative meaning to the quantitative results. The group had time to review Obesity, Smoking and Breast Cancer in more detail during this first meeting.

Prioritization Meeting III Goal: Identification of Priorities

This final meeting was devoted to finishing the discussion of both qualitative and quantitative issues regarding the health needs of the community. The meeting started by reviewing the last three health topics: Suicide/Self-Inflicted Injury, Substance use, and Alcohol Use. Participants were asked to contribute to the process of reaching a consensus of what the top two or three health needs are and how they should be prioritized. This meeting concluded with the selection of Obesity and Substance Use as the two top community health needs to be the focus for Saratoga County for the next three years.

Selected Priorities

After going through the prioritization process for the Community Health Improvement Plan, Saratoga County selected two priorities based on data and community partner input. The selected priorities are Prevent Chronic Disease with a focus on Obesity and Promote Well-Being and Prevent Mental and Substance Use Disorders. The group felt that an advantage to selecting obesity as a priority is that it is multifaceted. Obesity affects many other health conditions and behaviors that improving obesity rates should lead to improvements in other health indicators. Also, many different types of sectors can undertake actions to address obesity from the clinical to community settings. Given that Saratoga County residents identified obesity as the most serious public health issue in the recent Community Health Survey (Appendix C), then, we can expect a lot of good buy-in from the public. After reviewing the data and through group discussion it was apparent that one of the priority areas needed to be Substance Use Disorders. Some feared that if substance use was not chosen as a priority again this round that the County would lose focus on opioids during a period when we are facing some real and significant threats, such as the wide use of fentanyl. There were clear indicators showing that some of Saratoga County's more rural municipalities are experiencing an opioid crisis, and outreach to those communities appears to be inadequate such as in the Corinth Area. Overall, there appears to be a mismatch between where the problem is and where the resources are located. There is a need to get resources outside of urban centers and into rural areas.

SCPHS and Saratoga Hospital navigated this selection progress together. The two entities met periodically between the prioritization meetings to ensure everyone was working together and to refine the process from years past. Below is a list of all of the community partners that were in attendance during at least one of the three meetings mentioned above.

- Albany Medical Center
- Better Health for Northeast New York (BHNNY)
- Cancer Peer Education, St. Mary's Hospital
- CDPHP
- Cornell Cooperative Extension Albany
- Cornell Cooperative Extension Saratoga
- Four Winds Hospital
- Glens Falls Hospital
- Head Start Saratoga County EOC
- Healthy Capital District Initiative (HCDI)
- Mechanicville Area Community Service Center
- Mental Health ~ Saratoga Hospital
- New York Council on Problem Gambling
- Northern Rivers Family Services
- Prevention Council of Saratoga County
- Saratoga County Dept. of Social Services
- Saratoga County Dept. of Mental Health & Addiction Services
- Saratoga County Public Health Services
- Saratoga County Youth Bureau
- Saratoga Emergency Physicians
- Saratoga Hospital
- Saratoga Hospital Emergency Department
- Saratoga Office for the Aging
- Saratoga Regional YMCA
- Saratoga Springs Housing Authority
- The Food Pantries for the Capital District
- Wellspring

Top Two Prevention Agenda Priorities

1. Priority Area: Prevent Chronic Disease – Focus Area: Obesity Prevention

The Community Health Council talked in detail about choosing obesity as a priority. Obesity affects many other health conditions and behaviors, and improving obesity rates should lead to improvements in other health indicators. As mentioned in the health status - obesity section in the Community Health Assessment, there was significant data that put an emphasis on this priority. One of the most glaring is the fact that while overweight and obesity trends for children under the age of five in New York State have been falling somewhat since 2010, they have been steadily rising for children in Saratoga County. Also, as many view Saratoga as a fairly healthy and affluent county, it was interesting to learn that food security in Saratoga County is worsening based on data from the USDA Food Environmental Atlas showing that the percentage of Saratoga County residents with low income and low access to a supermarket or large grocery store has increased from 3.9% in 2010 to 4.0% in 2015. In addition, 8.8% of Saratoga County's population reported in 2015 not having access to a reliable source of food during that year according to 2015 Map the Meal Gap Data (data as of June 2018). Based on this data, SCPHS and Saratoga Hospital have devised a multi-faceted approach to address obesity in Saratoga County for the next three years that includes breastfeeding promotion, improving access to nutritious foods among the County's large population of people struggling with food insecurity, improving diabetes identification and management, and programs aimed specifically at improving the health of residents of Corinth who are experiencing significant health disparities.

Breastfeeding promotion. Obesity in very young children is a serious concern. Unfortunately, children do not simply "grow out" of their baby fat; instead, excess weight during early development alters neural, metabolic, and behavioral systems so as to place those children at greater risk for obesity and chronic disease throughout their lifespan (Birch, Parker, & Burns, 2011). Infancy and early childhood is the ideal time to intervene as behaviors that influence obesity are just being learned and have not become ingrained (Birch et al., 2011). Breastfeeding provides infants with nature's ideal nutrition while the responsive caregiving interactions between mother and child, along with all of the techniques associated with successful breastfeeding (e.g., learning infant cues, establishing routines) all promote positive development (Birch et al., 2011). Thus, breastfeeding has been associated with a reduction in childhood obesity (Birch et al., 2011).

In December 2018 Saratoga County Public Health Services (SCPHS) invited community partners to join them for a Maternal, Infant and Child Health (MICH) Meeting. After reviewing data from the 2016 CHIP it was clear that there were some areas of need identified for Maternal Infant and Child Health including breastfeeding rates and maternal health. After the conclusion of the meeting the MICH Coalition was established and the first meeting was held in April 2019. The group discussed what other sectors they may be missing and created the Vision and Mission Statement for the coalition. The group reviewed some of the newer data that was collected during the 2019 CHNA process. After discussing some of the needs in Saratoga County it became clear that the group needed to form subcommittees.

The subcommittees that were formed were a Breastfeeding Subcommittee and a Substance Use Disorder Subcommittee.

The Breastfeeding subcommittee met in June 2019. The group first reviewed some of the breastfeeding and obesity specific data for Saratoga County and discussed some intervention ideas. One was to implement a Baby Café within Saratoga County. A Baby Café that provides ongoing support to breastfeeding mothers would help overcome some of the barriers to breastfeeding that include lack of knowledge, social norms, inadequate family and social support, lactation problems, and employment (Birch et al., 2011). The goal would be to help support moms and increase breastfeeding rates which would reduce obesity rates, one of the two priorities for the Community Health Improvement Plan.

MICH Breastfeeding Subcommittee is also looking into increasing the number of Breastfeeding Friendly Practices. Currently, there are only two practices with this designation in Saratoga County and the Breastfeeding subcommittee discussed having a Lunch & Learn with other practices to help them get all of their requirements together to become Breastfeeding Friendly. Provider support and knowledge regarding breastfeeding practices can be particularly useful to reducing the risk of obesity with respect to women who choose to pump and store breastmilk to be fed by bottle either due to work or other circumstances and/or supplement or use formula (Birch et al., 2011). The goal would be to increase the number of Breastfeeding Friendly Practices within Saratoga County.

Furthermore, the MICH Breastfeeding Subcommittee discussed improving lactation support in work environments. The group discussed the challenges of returning to work and breastfeeding and NYS laws that require employers to have a place for employees to pump. The subcommittee discussed setting future goals to explore current policies and practices at larger employers in our County and assisting them with complying with the both the letter and intent of the law.

In addition to participating in the MICH coalition and other public health efforts to improve breastfeeding rates across the County, including the Baby Café, Saratoga Hospital continues to build its internal breastfeeding programs and initiatives. For instance, the hospital has a formal Breastfeeding Program that aims to promote breastfeeding at delivery. Plans to expand that program include goals of increasing the number of RNs on staff with CLC certification and growing its hospital-led breastfeeding support group through partnerships with both WIC and the MICH.

Food Insecurity and improving the nutritional profile of food pantry foods. Food insecurity has been shown to be a factor in increased obesity rates (Map the Meal Gap, 2019). As noted above, access to affordable, healthy food is a growing problem in Saratoga County. Improving the nutritional profile of foods available at food pantries and other charitable CBOs in Saratoga County should translate into healthier diets among food insecure residents utilizing food pantries and, ultimately, healthier BMIs (Handforth, Hennik & Schwartz, 2013). However, healthier food pantry inventories generally require pantries to improve their ability to procure, handle, and monitor large quantities of perishable foods (Campbell, Ross & Webb, 2017).

Many charitable food CBOs in Saratoga County are encountering challenges meeting the needs of our residents. Among other things, despite serving communities with high unmet need, some pantries and CBOs are either declining to accept donations of fresh fruits and vegetables or throwing such donations away because they lack processes and equipment to store, use and distribute perishable food donations in a timely manner. The need to improve CBO ability to handle perishable foods is made

more urgent by the recent passage of New York State’s “Food Donation and Food Scraps Recycling” legislation that will go into effect on January 1, 2022 (ECL Article 27, Title 22), which promotes the diversion of edible food waste to charitable use. This legislation provides both an opportunity and a challenge to local CBOs who must prepare to accept a much higher volume of perishable food, establish relationships with large food generators, establish new processes and procedures for use and distribution of perishable foods, and improve coordination among food pantries so that donated food is not wasted. In order to improve food pantry/charitable food CBO ability to receive, store, and distribute perishable foods, SCPHS will lead an assessment of local food pantry/charitable food CBO ability to handle perishable foods. An assessment should identify existing capacity, barriers to improvement, and opportunities for collaboration.

Above and beyond perishable foods, the food stock available in area pantries varies greatly in terms of its nutritional and health promoting status. Therefore, SCPHS and Saratoga Hospital are also attempting to promote both awareness of the need for “healthy” food donations and improving the volume of such foods available at local pantries. In 2016 SCPHS, Saratoga Hospital, and key partners formed the Saratoga County Pre-diabetes Coalition (SCPC) with the intent of improving awareness and prevention of the onset of diabetes through the creation of a social and physical environment that encourages healthy lifestyles. For 2019, SCPHS has adopted a goal of promoting the *Nourish Your Neighbor* (NYN) initiative through at least three food drives. The NYN food drives emphasize healthy food donations for local community pantries. Typical food pantry donations are frequently high in sugar, fat, sodium, and calories, and often lack other important nutrients. This can be especially hard on children and those living with chronic disease. A healthy food drive emphasizes more nutritious foods such as brown rice, low-sodium canned veggies, nuts and seeds, 100% fruit juice, etc. In June 2019, Saratoga County Employees held a NYN Food Drive and collected over 200 items that were donated to a few different food pantries in the region. Other SCPC members anticipate having a NYN food drive by the end of the year, including Saratoga Hospital and the Lions Club.

Saratoga Hospital has patient programs that support healthier food choices to improve health status for all types of patients, whether food insecure or not. Screening to identify patients with food insecurity is a priority across the board. If patients screen positively for food insecurity, the hospital facilitates and actively supports referrals to both internal and external food programs. Internally, the hospital hosts a Healthy Education Food Pantry at its Community Health Center, which is stocked with nutritious choices, and conducts a 16-week Nutrition Prescription program course designed to improve patient knowledge of nutrition, medicinal properties of fruits and vegetables, and provide moral support to combat chronic illness. Among other things, the hospital’s nutrition team develops disease-specific educational materials and has formed a collaboration with Pitney Meadows Farm to engage patients in a garden program.

Diabetes identification and management. The Pre-Diabetes Coalition, which is co-led by Saratoga Hospital and SCPHS, is also distributing diabetes risk assessment surveys across the county to raise awareness of individual risk of developing diabetes. In addition, Saratoga Hospital also offers a Diabetes Self-Management Program and diabetes prevention community education. Diabetes education and support is offered in group and individual settings with a health care provider referral.

Healthy Corinth Coalition. Due to the information found in the 2019 CHNA regarding health disparities in Corinth, SCPHS and Saratoga Hospital worked with Corinth to create Healthy Corinth – a coalition to serve Corinth’s specific needs related to the 2019 priority areas. In April 2019, we met with a small group of Corinth residents to obtain more information regarding whether obesity and substance use are concerns in the Corinth area and suggestions as to whom to speak with further. The following month in May 2019, we met with Supervisor Richard Lucia to present the health indicator data and identify next steps. In June 2019, we invited community leaders to attend a meeting at which we presented the health indicator data and agreed to hold a public forum. The public forum was held in July 2019 where we presented the health indicator data and invited people to join workgroups for obesity and substance use. Since then, the coalition has continued to meet and develop area-specific plans to promote better health. Among the plans currently being formulated are conducting a *Safe Routes to School Program* with the Corinth Central School District to increase the number of children employing active transportation to commute to and from school and a school garden.

2. **Priority Area: Promote Well-Being and Prevention Mental and Substance Use Disorders**
– Focus area: Substance Use Disorders Prevention

This priority area was also selected during the 2016 CHIP cycle. Some feared that if substance use prevention was not chosen as a priority again this round that the County would lose focus on opioids during a period when we are facing some real and significant threats, such as the wide use of fentanyl. As mentioned in the health status-Substance Use Disorders Section of the Community Health Assessment, there is data indicating that opioid misuse should be a continued focus. Although there is data showing that alcohol and other substances are impacting the health of our population, the substance that raised the most concern during the Prioritization Meetings was opioids and, in particular, the rise in fentanyl-adulterated opioids. While trends in New York State are beginning to show progress in reducing opioid-related deaths, Saratoga County’s opioid-related deaths continue to increase. The Community Health Council also found during the prioritization process that, despite clear indicators showing that some of Saratoga County’s more rural municipalities are experiencing an opioid crisis, outreach to those communities is weak or ineffective. Overall, there appears to be a mismatch between where the problem is and where the resources are located. There is a need to get resources outside of urban centers and into rural areas. Thus far, SCPHS and Saratoga Hospital are building an approach to SUD that includes harm reduction efforts in areas with the greatest opioid burden, improved ability to identify and treat babies with NAS and their families, and improving knowledge about and access to addiction treatment in the community.

Harm reduction. As noted above in the obesity priority area section, SCPHS and Saratoga Hospital worked with Corinth to create Healthy Corinth – a coalition to serve Corinth’s specific needs related to the 2019 priority areas. Healthy Corinth has recognized the need for more resources in the community related to a variety of health topics; at the present time, the emphasis is on harm reduction. The group has looked into permanent sharps containers as a way to eliminate syringe litter. They also

worked with the County Sheriff's department to secure a local site for the Annual DEA Rx Drug Take Back Day in October 2019. Another harm reduction strategy the group has been discussing is increasing the availability and use of Narcan in the community. At SCPHS' suggestion, plans for the first County-Wide Narcan Training held on August 30, 2019 developed by members of the Mental Health and Substance Use Disorder Coalition included a location in Corinth. Thus, the Jessup Landing EMS in Corinth was one of the sites for the event, and community members were invited to receive Free Narcan training and a Narcan Kit.

Neonatal Abstinence Syndrome (NAS). Because NAS continues to increase in Saratoga County despite a decreasing trend at the state level, NAS continues to be a focus for SCPHS and Saratoga Hospital. SCPHS and Saratoga Hospital both sit on the Neonatal Abstinence Syndrome (NAS) Subcommittee led by Warren and Washington Counties. The subcommittee has been working on a Plan of Safe Care for mothers to ensure a smooth delivery and transition for their babies. To provide a forum in which to address implementation of the *Plan of Safe Care* specifically in Saratoga County, SCPHS called a meeting of SCPHS, Saratoga Hospital, and Saratoga County Department of Social Services and recommended that they continue to meet, along with other related community partners, through the Substance Use Subcommittee of the MICH Coalition. The group is hoping to increase education among providers and work with patients much earlier in their pregnancy. Saratoga Hospital can lead by example as it has already transitioned from *Finnegan Neonatal Abstinence Scoring* to *Eat, Sleep, and Console*.

Addiction Education and Treatment. Through its Community Health Center Addiction Medicine Program, Saratoga Hospital intends to host four community education forums annually on a variety of addiction issues, such as the disease of addiction, treatment options, and the alcohol abuse. There is also work being done for the Medication Assisted Treatment (MAT) Hospital-based Expansion Program. The hospital is working to establish referral processes and workflows to provide MAT in the Saratoga Hospital Emergency Department with referrals to community based MAT Services.

Goals, Objectives, Intervention Strategies and Local Process Measures

Priority Area: Prevent Chronic Disease

Focus Area: Obesity Prevention

NYS Prevention Agenda Goals	Local Objectives	Local Intervention Strategies	Local Process Measures
1.1 Increase access to healthy and affordable foods and beverages	<ul style="list-style-type: none"> Decrease overweight and obesity in children under the age of 5 years by 5% from the baseline of: 18.3% (2015-2017) children aged <5 years overweight ; 15.7% (2015-17) children aged <5 years obese 	<ul style="list-style-type: none"> Create a <i>Baby Café</i> within Saratoga County 	<ul style="list-style-type: none"> Number of <i>Baby Cafes</i> within Saratoga County Number of attendees at the <i>Baby Café</i>
1.2 Increase skills and knowledge to support healthy food and beverage choices	<ul style="list-style-type: none"> Increase breastfeeding rates following discharge from hospital by 5% from current baseline of : 26.6% (2015-17) of children <5 years old breastfed at 6 months; 15.3% (2015-17) of children <5 years old breastfed at 12 months 	<ul style="list-style-type: none"> Increase the number of <i>Breastfeeding Friendly Practices</i> 	<ul style="list-style-type: none"> Number of attendees Breastfeeding friendly lunch and learn Number of practices that are <i>Breastfeeding Friendly Practices</i>
1.3 Increase food security	<ul style="list-style-type: none"> Increase the number of Breastfeeding Friendly Practices in Saratoga County from the baseline of 2 in 2019 to 4 by December 2021. 	<ul style="list-style-type: none"> Healthy Food Initiatives in Saratoga County Food Pantries and Charitable Food CBOs 	<ul style="list-style-type: none"> Draft assessment questionnaire Solicit completion of questionnaire by area pantries Draft assessment
2.3 Increase access, for people of all ages and abilities, to indoor and/or outdoor places for physical activity	<ul style="list-style-type: none"> Increase capacity of food pantries to receive, store and distribute perishable foods (e.g., fruits and vegetables) (pounds received, distributed, wasted).as measured by pounds received and distributed (and not wasted), by 5% by December 2021 (baseline to be set in 2020) Increase access of food pantry consumers to 	<ul style="list-style-type: none"> 2.3.1 <i>Safe Routes to School</i> – Corinth School District Pitney Meadows Farm Program Healthy Food Choices in Saratoga Hospital’s Cafeteria Saratoga Hospital Employee Wellness Fair Saratoga Hospital Employee Wellness Weight loss Programs Healthy Education Food Pantry 	<ul style="list-style-type: none"> Establish <i>Safe Routes to School</i> Task Force Draft action plan Draft assessment of safety of environs Implement improvements Number of patients involved in garden program Number of Healthy Choices offered Number of flu shots given to hospital employees Number of cholesterol blood draws among hospital employees % weight loss tracked among hospital employees Time tracked walking Tracking system developed for Community Health Center

	<p>healthy foods in terms of amount, frequency, and selection.</p> <ul style="list-style-type: none"> • Decrease the % of children who are overweight or obese among Corinth Central School District public school students by 5% by December 2021 from baseline 31.7% overweight or obese students; 19% overweight, 12.7% obese (2016-18) or more current data from the period prior to the 2019-20 school year as it becomes available. • Increase the # of Corinth CSD public school children employing active transport (walking, biking) to and from school by 5% by December 2021 (baseline to be obtained from 2019-2020 survey data) 	<ul style="list-style-type: none"> • Bariatric Weight Loss Program • Breastfeeding Program at Saratoga Hospital • Diabetes Prevention Community Education • Diabetes Self-Management Program • Medical Nutrient Therapy • Nutrition Prescription Program • Saratoga County Pre-diabetes Coalition 	<ul style="list-style-type: none"> • Number of people attending informational sessions • Number of patients having bariatric surgery • Number of patients exclusively breastfeeding • Number of patients supplementing with formula • Number of inpatient and outpatients lactation consults • Number of classes offered • Number of attendees • Number of program participants • Number of patients referred to nutrition counseling • Number of participants in the program • Number of booklets distributed
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Priority Area: Promote Well-Being and Prevent Mental and Substance Use Disorders
 Focus Area: Substance Use Disorder Prevention

NYS Prevention Agenda Goals	Local Objectives	Local Intervention Strategies	Local Process Measures
2.2 Prevent opioid overdose deaths	<ul style="list-style-type: none"> Decrease the age-adjusted overdose deaths involving opioids among residents of Corinth zip code 12822 and Saratoga County as a whole from 6.1 per 100,000 population in 2016 (or more recent data as it becomes available) by 5% by December 2021. Decrease all emergency department visits (including outpatients and admitted patients) involving any opioid overdose, age-adjusted among residents of Corinth zip code 12822/North West Neighborhood and Saratoga County as a whole from 62.2 per 100,000 population in 2016 (or more recent data as it becomes available) by 5% by December 2021. Decrease the number of newborns with withdrawal syndrome and/or affected by narcotics or breast milk, rate per 1,000 delivery hospitalizations/newborn discharges from 5.2 per 100,000 in 2013 (SPARCS Data) (or more recent data as it becomes available) by 5% by December 2021. 	<ul style="list-style-type: none"> 2.2.2 Increase availability of/access to overdose reversal (Naloxone) trainings to prescribers, pharmacists, and consumers 2.2.5 Establish additional permanent safe disposal sites for prescription drugs and organized take-back days 2.2.4 Build support systems to care for opioid users or at risk of an overdose through NAS Subcommittee Community Health Center Addiction Services Program <i>Eat, Sleep, Console (ESC)</i> Program at Saratoga Hospital Opiate Initiatives of Saratoga Hospital/Community Health Center Substance Use Disorder and <i>Medication Assisted Treatment (MAT)</i> Hospital-based Expansion Program 	<ul style="list-style-type: none"> Number of Naloxone trainings held in Saratoga County Number of new <i>Take Back</i> locations Number of new permanent safe disposal sites established Number of Saratoga NAS/MICH SUD Subcommittee Meetings Number of participants in groups and community forums ESC methodology implemented Number of NAS transfers to tertiary care Number of NAS newborns received pharmacological treatment Number and duration of opiate prescriptions Number of ED providers who complete trainings and obtain X waiver % of patients who are offered an initial appointment within 7 days Number of patients referred for SUD evaluation Number of patients referred to MAT Services

Conclusion

The Saratoga County Community Health Council is comprised of key stakeholders in the community. This group was instrumental in working with HCDI, SCPHS and Saratoga Hospital in selecting the health priorities and will continue to meet on a quarterly basis to discuss the ongoing work and activities described above. The Council will also be assisting in evaluation of activities and will be a sounding board as challenges arise.

COMMUNICATION PLAN

The Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) for Saratoga County will be disseminated in a variety of ways to include the following:

- A press release announcing publication of the 2019 CHA/CHIP will be provided to the local print with a request to include a link to the Public Health Website
- A copy of the 2019 CHA/CHIP will be posted to the Public Health website and a link posted on the Public Health's Facebook page.
- A copy of the plan will be put on Saratoga Hospital's website and a link posted on the Hospital's Facebook page.
- Printed hard copies and electronic versions of the documents will be offered to the Stakeholders included in the CHIP and those that attend the quarterly Community Health Council Meetings.
- County, Town and Village Government will be offered electronic copies.
- An email with a link to the 2019 CHA/CHIP on the Public Health website will also be sent to organizations, school district and local colleges, libraries and community health agencies.
- A copy of the 2019 CHA/CHIP will be made available on the HCDI website.
- Public Health representatives will be available to speak to community organizations, planning groups, and concerned citizens up request.

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APPENDICES

Appendix A: Saratoga County Assets and Resources- Obesity

Organization	Obesity Assets
Capital Region Eat Smart New York Program	<ul style="list-style-type: none"> • Series and Single Sessions with Adults or Children • Guided Store Tours • Retail and Farmers Market Food Demonstrations • After/Beyond School-Based Youth Programs • Nutrition Events including tabling at community events. • Distribution of print materials as well as digital materials • Agency training and program presentations
Cornell Cooperative Extension Saratoga County	<ul style="list-style-type: none"> • Educational programs including nutrition, food and cook skills • Farm to School Grant Recipient with Saratoga City School and Pitney Meadows Community Farm • Supports the Saratoga County Pre-diabetes Coalition
CDPHP	<ul style="list-style-type: none"> • Coverage for exercise and nutritional counseling visits with primary care providers and Registered Dieticians for eligible members via the Healthier Generation Benefit • Community based resources – Fitness Connect (free fitness center open to all individuals 18 years of age and older), CDPHP Cycle! (bike share program that offers a healthy travel choice; open to all individuals) and community calendar classes that support fitness, nutrition and overall wellness (for members only), CDPHP Healthy Neighborhood series which provides community resources and healthy activities in select locations (open to all individuals) • Support and resources to lose weight safely and effectively – Fitness Reimbursement (for members only), Weight Management Reimbursement (for members only), Café Well which offers programs, support and guidance needed to take control of your health (for members only) and Zipongo which is a digital nutrition platform (for members only)
Saratoga Regional YMCA	<ul style="list-style-type: none"> •Dedicated weight loss programs •Fitness onboarding program for new members •Personal Training •Family Programming following Smart Moves Curriculum and Nutritional Guidance •CATCH Curriculum) Coordinated Approach to Children’s Health in all Childcare Activities including BASE & CAMP •Cooking with Kids Classes

Pitney Meadows Community Farm	<ul style="list-style-type: none"> • Farm to School Grant Recipient with Saratoga City School and Cornell Cooperative Extension Saratoga County
Capital District YMCA- Southern Saratoga Branch	<ul style="list-style-type: none"> • Healthy Living, Social Responsibility, Youth Development • Provide health and wellness activities to promote strong mind, body and spirit • Programs such as LIVESTRONG®, Pedaling for Parkinson’s and Enhance Fitness®
Saratoga County Public Health Services	<ul style="list-style-type: none"> •Facilitates the Maternal Infant Child Health Coalition •Facilitates the Saratoga County Diabetes Support Group •Supports the Saratoga County Pre-diabetes Coalition
Saratoga Hospital	<ul style="list-style-type: none"> • Supports the Saratoga County Pre-diabetes Coalition • Bariatric Surgery and Weight-Loss Program, includes medical management of obesity, medical nutrition therapy with Registered Dietitian, body composition analysis, monthly community support group meetings • Outpatient nutrition counseling by Registered Dietitians for obesity and related conditions • Registered Dietitians embedded in 4 primary care and 3 specialty care locations to support chronic disease management, incl. obesity (one location is CHC: works with clients to utilize healthy choices available through food pantry, participates in diabetes classes, Nutrition Rx program) • Diabetes prevention and diabetes education classes provided free to community, diabetes self-management training services provided with fee-for-service • Increased healthy offerings in hospital cafeteria • FANS coordinates Nourish Your Neighbor food drives for CHC food pantry twice a year
Southern Adirondack Library System	<ul style="list-style-type: none"> •Coordinates fresh produce distribution twice a week, to several library locations, in partnership with Comfort Foods Community •“Libraries Mean Business” Program trains staff to provide sound health resources to library users on a variety of health topics •“Library Moon Walk” to promote physical activity throughout local communities •Supports the Saratoga County Pre-diabetes Coalition

Saratoga County Office for the Aging	<ul style="list-style-type: none"> • Facilitates “Path to Wellness” program, a series of 6 classes teaching techniques to successfully live with chronic diseases, taught by trained volunteers and uses The Stanford Model • Supports the Saratoga County Pre-diabetes Coalition
Saratoga Lions Club	<ul style="list-style-type: none"> • Lions Club International identified diabetes as an area of focus for their organization for the next 100 years. • Incoming district chair is a trained Diabetes Prevention Program (DPP) Lifestyle Coach. The local Lions Club was recently chosen to participate in a national DPP pilot program with support from Saratoga Hospital Outpatient Nutrition Services. (This program is currently not offered in Saratoga County.) • Recently underwrote the cost of Pre-diabetes education booklets, including a diabetes risk assessment, for distribution by the Saratoga County Pre-diabetes Coalition • Supports the Saratoga County Pre-diabetes Coalition

Appendix B: Saratoga County Assets and Resources- Mental Health and Substance Use Disorders

Organization	Mental Health and Substance Abuse Assets
CAPTAIN Community Human Services	<ul style="list-style-type: none"> • Housing programs for homeless individuals and families. Eviction prevention to keep individuals and families stably-housed and Rapid Rehousing Services to assist homeless individuals in locating permanent housing. • Runaway and Homeless Youth Shelter for male and female teens ages 13-17 for up to 30 days, with the potential for longer on a case-by-case basis. We have 8-bed capacity, case management, transportation to and from school or other appointments, family mediation, and crisis stabilization. We serve the entire Capital Region and provide emergency housing for youth in crisis, running away, homeless, victims of trafficking, and others. • Street Outreach services to youth in Saratoga County who are at-risk, runaway, homeless, exploited, trafficked, and others who are vulnerable. Basic needs items, access to emergency shelter housing, transportation, case management, advocacy, crisis stabilization, and many other services. • Emergency Food Pantry for individuals and families. • Bike program to get lightly used and new bikes in the hands of youth and adults. • Feeding programs, holiday giving programs, VITA tax assistance, and many more. • Many other services for low-income youth, individuals, and families
Capital District YMCA- Southern Saratoga Branch	<ul style="list-style-type: none"> • Healthy Living, Social Responsibility, Youth Development • Provide health and wellness activities to promote strong mind, body and spirit • Programs such as LIVESTRONG®, Pedaling for Parkinson’s and Enhance Fitness®
Catholic Charities Care Coordination Services	<ul style="list-style-type: none"> • Long standing community case management provider • Providing Harm Reduction Services through drop in and by appointment in the community including: Syringe Exchange, Risk Reduction Education, Overdose Training w/Naloxone, HIV/HCV Screening and testing, Substance Use Treatment Referrals • Providing non-judgmental, person-centered care • Additionally, Project Safe Point provides these services in the following counties: Columbia, Greene, Schenectady, Schoharie, Otsego, Delaware, Fulton, Montgomery, Saratoga, and Herkimer

CDPHP	<ul style="list-style-type: none"> • Medical and behavioral health case management services (w/ a Registered Dietician on staff) to help with: <ul style="list-style-type: none"> • Acute inpatient care • Medication management • Group therapy • Individual outpatient therapy • Linking to the appropriate mental health provider
Four Winds	<ul style="list-style-type: none"> • Private Psychiatric Hospital providing Child, Adolescent and Adult inpatient behavioral health services • Outpatient Child & Adolescent practice • Partial Hospital and Intensive Outpatient Programs for Adults • Intensive Outpatient Program for Adolescents • Region 2 Provider for Project TEACH; a child & adolescent psychiatric education and consultative service for Primary Care Providers • Fall and Spring Grand Rounds presentations open to community.
Franklin Community Center, Inc.	<ul style="list-style-type: none"> • Food Pantry • Project Lift- a free, after-school prevention program for youth in grades 1-6, children are provided with the role models and education needed to help set them on a more positive developmental path • Franklin Community Manor: A Permanent, Safe and Affordable Housing Facility for Low Income Individuals in Saratoga, NY • Franklin's Free Store: small household items and gently used clothing • Other additional services offered for low income families, adults and children include, but not limited to: school supplies, holiday assistance, furniture matching program, referral services.
Glens Falls Hospital-Health Promotion Center/Tobacco Free Initiative	<ul style="list-style-type: none"> • Delivers expert health promotion to the North Country community • Contributes to chronic disease prevention by addressing tobacco use & dependence within our community • Provides free consultation, resources and support to health systems in order to advance evidence-based tobacco dependence interventions.
Healing Springs Recovery Community Center	<ul style="list-style-type: none"> • Healing Springs is a community center with peer-driven, peer-delivered services, offering hope to those in recovery from addiction and their family members. We have resources, we make referrals and we connect people. Nearly all services are available free of charge. • A Family Support Navigator is available to help families with a loved one who is living with addiction, whether or not that individual seeks out help and recovery. This service is free to residents of Saratoga, Warren and Washington counties. • Healing Springs hosts a variety of AA related meetings weekly: NA, Nar-Anon, Al-Anon, HA, Women's AA. • In addition, a number of social activities are held: movie night, craft projects, game night, hiking trips, etc. for people in recovery from addiction and/or

	<p>their families.</p> <ul style="list-style-type: none"> • A monthly schedule of programs and activities is available by contacting the center by phone or stopping in.
Mechanicville Area Community Services Center (MACSC)	<ul style="list-style-type: none"> • Counseling Services Available: <ul style="list-style-type: none"> -ECS Psychological Services, PC – Mondays, Tuesdays & Thursdays -Saratoga Center for the Family – Wednesday & Thursday evenings -Saratoga County Mental Health – Thursdays
Moreau Community Center	<ul style="list-style-type: none"> • ECS Psychological Services – counseling • COTI (Center of Treatment Innovation) – peer counseling for opioid and heroin addiction • Food Pantry • Thrift Store • Community Navigator for social determinants of health • WIC Clinic – 2nd Wednesday of the month
Northern Rivers Family Services	<ul style="list-style-type: none"> • Crisis Teams • Adult Mobile Team - 5 County Regional (AMT) • Child and Adolescent Mobile Team - Capital Region (CAMT) • Home Based Crisis Intervention (HBCI) Behavioral Health Centers • Behavioral Health Center @ Albany • Behavioral Health Center @ Malta • Behavioral Health Center @ Schenectady • Co-located Behavioral Health Clinic at Hometown Health Centers • Early Recognition Specialist Program • OnTrackNY • School Based Behavioral Health • Albany City School District • Ballston Spa Central School District • Coxsackie-Athens School District • Saratoga Springs School District • Schenectady City School District • Queensbury Union Free School District
Planned Parenthood-Saratoga Springs	<ul style="list-style-type: none"> • Family Planning/Reproductive Health Services for Women and Men, includes Depression Screening • STI Testing and Treatment • Transgender Services • Community Education and Advocacy • Treatment for Mild to Moderate Depression • Primary Care and Telehealth Services • PrEP

<p>Prevention Council of Saratoga County</p>	<ul style="list-style-type: none"> •The Prevention Council staff work in a wide range of venues – from schools and summer camps to courts and family homes – to provide prevention services, including program development and community-based initiatives •Training and education for human service professionals. Whether for in-service credit or to keep up with current trends, the agency is committed to helping our colleagues see how prevention services, programs, and initiatives are relevant to the work they do every day •A liaison for area residents looking for additional resources and information about alcohol, substance use, gambling, and other addiction issues •Provides education, information and referral services on the subjects of alcohol, tobacco, other drug and violence prevention to individuals and local communities •The school programs cover the prevention of alcohol, tobacco and other drugs, as well as bullying and violence prevention, internet safety and conflict resolution. All school programs focus on building skills in order to achieve social, emotional, and academic success. Courses are taught by trained staff who work closely with each school district to meet student and scheduling needs, while also meeting New York State learning standards •The Prevention Council also offers three different substance abuse education classes designed for youth involved in the court system. These substance abuse education classes are not limited to court- referred participants. Both programs are offered to schools as alternatives to suspensions, in addition to suspensions, and also to parents or guardians wishing to refer their children). Both classes have fees attached that can be waived or reduced in some circumstances. The classes are best suited for first- or second-time non-violent offenders • The Prevention Council offers counseling services in various schools throughout Saratoga County via its Student Assistance Program and General Counseling Programs Offers the Reconnecting Youth program which is a peer-group approach to building the life skills for at-risk high school students. The course is designed to foster personal and social skills such as self- esteem, health decision making, personal control, and interpersonal communication
<p>Recovery Advocacy In Saratoga (RAIS)</p>	<ul style="list-style-type: none"> • Recovery Community Organizations (RCO) • A voice of recovery to reduce the stigma of addiction and promote wellness in long-term recovery by changing public perception of the disease and those affected by it

<p>Rehabilitation Support Services Capital District Stabilization and Support Program</p>	<ul style="list-style-type: none"> • Housing Options • Care Coordination and Treatment • Employment Services • Wellness Programs
<p>Saratoga Center for the Family</p>	<ul style="list-style-type: none"> • Outpatient Clinical Services: We offer individual, family and group counseling, and psychological testing services for children and adults at our central office in Saratoga Springs as well as satellite locations throughout the community. Our clinical services focus on a broad variety of concerns such as: Depression and Anxiety, Physical or Sexual Abuse, Trauma, Family Dysfunction, Behavior Interventions, Attention Disorders, Stress Management. • Student Empowerment Services: Saratoga Center for the Family collaborates with School Districts to offer Student Empowerment Services – A mental health counseling program within the school setting. The program addresses the social, emotional and mental health needs of students in grades K-12 and encompasses developmentally appropriate screening, intervention, behavioral assistance, training and psychiatric services; all focused on serving student needs within the context of the school environment. • Education and Prevention Programs: Our programs are designed to teach participants about conflict resolution, how to acquire problem solving skills, and how to build and maintain healthy relationships. The goal is to build stronger families where children feel loved and valued and can thrive in a safe and healthy environment. • The Harriet M. West Child Advocacy Center: Saratoga Center for the Family’s Child Advocacy Center offers coordinated services to help children and their families through an investigation of child abuse. Our Child Advocacy Center services include: Forensic Interviews, Victim and Family Advocacy, Pediatric Forensic Medical Exams, and Trauma Focused Counseling Services.
<p>Saratoga Community Health Center</p>	<ul style="list-style-type: none"> • Assessment and diagnosis • Medication recommendations • Short-term counseling • Case management: connecting you with community resources • Drug and alcohol abuse treatment: short-term counseling and program assistance • Community Narcan training • Community Education events on addiction medication topics

Saratoga County Alcohol and Sub Abuse Services	<ul style="list-style-type: none"> • Offers outpatient, women's rehab, men's rehab and substance abuse treatment services
Saratoga County Department of Social Services	<ul style="list-style-type: none"> • Eligibility Programs <ul style="list-style-type: none"> - Child Care Assistance - Child Support Collection - Home Energy Assistance Program (HEAP) - Medicaid - Medical Transportation - Supplemental Nutrition Assistance Program (SNAP) - Temporary Assistance (TA) - Employment Services • Services <ul style="list-style-type: none"> - Adult and Family Services - Adult Protective Services - Domestic Violence - Home Care Services - Children's Services - Child Protective Services - Preventative Services - Foster Care and Adoption
Saratoga County Department of Mental Health and Addiction Services	<ul style="list-style-type: none"> • Personalized Recovery Oriented Services for adults designed to advance individual goals that are person-centered and strength-based – Psychiatric Rehabilitation Services • Alcohol and Substance Abuse assessment and treatment services for adults • Assisted Outpatient treatment services, Single Point of Access coordination and Court-Ordered evaluations • Outpatient psychiatry services, including medication management, group and family therapy, and individual psychotherapy from youth to geriatric. • Conduct evaluations per section 730 of NYS Mental Hygiene Law • Offer a variety of educational and training programs

<p>Saratoga County Public Health Services</p>	<ul style="list-style-type: none"> •Collaborates on prevention activities of Saratoga County Mental Health and Substance Abuse Coalition •Participates in the cross-county approach to prevent opioid abuse in pregnant women and support substance exposed infants and their families •Provides resources and links to prevention and mental emotional behavioral health promotion to schools & parent organizations within Saratoga County •Facilitates action-oriented planning meetings with community partners regarding mental health and substance abuse •Promotes suicide prevention through various outreach strategies
<p>Saratoga County Youth Bureau</p>	<ul style="list-style-type: none"> •Ongoing community needs assessment provides criteria for administration of Youth Development Programs (YDP) and Runaway and Homeless Youth funding streams. The YDP funding addresses community needs in the areas of economic security, physical and emotional health, education, family, community, citizenship and civic engagement. •Ongoing collaboration with funded agencies and community stakeholders; with links to their services, opportunities, and supports located on our webpage: http://www.saratogacountyny.gov/departments/youth-bureau/ •Responsible for the organization, coordination, and payment of Special Education and Early Intervention services and transportation services for preschool children, infants and toddlers with identified disabilities. The Early Intervention Program (EIP) is a statewide program offering therapeutic and support services for children with special needs up to 3 years of age and their families. The Committee on Preschool Special Education (CPSE) addresses the needs of children between the ages of 3 and 5 year old. The Youth Bureau is responsible for coordinating these services with providers, school districts, transportation contracts, parents, and the State Education Department and they are provided at no cost to families. •Wes Carr is the Saratoga county STOP-DWI coordinator. The program empowers Counties to coordinate local efforts to reduce alcohol and other drug related traffic crashes. It functions as a financially self-sustaining alcohol and highway safety program. The Youth Bureau provides support staff and coordination for the Saratoga County DWI Victim Impact Panels.
<p>Saratoga Hospital</p>	<ul style="list-style-type: none"> • Diagnostic Testing • Imaging and Radiology Services • Medical Laboratory Services • Inpatient Medical/Surgical Services • Ambulatory Surgery • Inpatient Mental Health Services • Addiction Medicine and Substance Use Disorder Services • Community education, support and Screening Services

	<ul style="list-style-type: none"> • Primary and Specialty Care Services • Emergency Services • Urgent Care Services • Rehabilitation Services • Maternity and Women’s Health Services
Schuylerville High School	<ul style="list-style-type: none"> • 2 school counselors who assist students with generalized social and emotional support, collaborate with families, and communicate with outside health care providers with proper authorization. • 1 intervention counselor who assists students in varying degrees of crisis; collaborates with families, and communicates with outside health care providers with proper authorization. • 1 school nurse who treats students and administers medications as allowed, collaborates and communicates with school physician, communicates with outside health care providers with proper authorization. • 1 school physician who oversees school health services and approves requests for home tutoring based on prolonged medical and/mental health related absences; reviews paperwork, communicates with health care providers, and verifies need for tutoring. • 1 school psychologist who administers psycho-educational evaluations and provides counseling as dictated by IEP’s and 504 plans. • 1 Student Services Team (administrators, school counselors, school psychologist, school nurse, director of special education) that meets weekly to review and manage the school level implications of a wide range of student issues, including mental health and medical situations. • Varying degrees of access to community-based mental health and substance abuse services for referral to students and families. • Access to self-contained therapeutic educational programs through the WSWHE BOCES, subject to the Committee on Special Education process and program vacancies.
Shelters of Saratoga	<ul style="list-style-type: none"> • Case Managed Shelter • Outreach • Code Blue Emergency Shelter • Drop-In Center • Affordable Housing • Community Resources
Shenendehowa Central School District	<ul style="list-style-type: none"> • Shenendehowa Central Schools covers approximately 86 square miles serving families from the communities of Clifton Park, Halfmoon, Ballston Lake, Round Lake, Malta and parts of Waterford, Rexford, Mechanicville and Stillwater. • Approximately 9,850 students attend eight elementary schools (gr. K- 5), three middle schools (gr. 6-8) and a high school (gr. 9-12). • Shenendehowa is one of the largest central school district in the area. • Mission is to work continuously and in partnership with the community to

	<p>ensure that all students develop and demonstrate the knowledge, skills, abilities and character needed to live useful, productive and rewarding lives</p> <ul style="list-style-type: none"> • We provide counseling to all students as needed in the area of academics, social and emotional health • Currently have a partnership with Saratoga Center for the Family and they provide mental health counseling to students in need
St. Peter's Addiction Recovery Services	<ul style="list-style-type: none"> • Psychosocial assessment • Psychiatric evaluations and medication monitoring • Individual, group and couple's counseling • Spirituality and 12-step meetings • Relapse prevention • Intensive outpatient trauma/recovery groups • MICA intensive outpatient program • Driving while intoxicated (DWI) evaluations • Self-esteem/relationship groups • Criminal justice programming • Family consultations and support • Tobacco recovery services • Discharge planning • Alumni groups • Shelter care • Adolescent programs
Transitional Services Association, Inc.	<ul style="list-style-type: none"> • OMH licensed Community Residences and Apartment Treatment • Supported Housing • OASAS licensed Community Reintegration Residence • Health Home Care Management • Assisted Outpatient Treatment (AOT) Care Management • TSA Housing First apartment program
Veterans & Community Housing Coalition	<ul style="list-style-type: none"> • Housing Options for Homeless Veterans and their families • Case Management and Advocacy • Referrals to public and federal benefits • Options for Transitional Housing for Homeless Veterans • Section 8 Office for Saratoga County
Wellspring	<ul style="list-style-type: none"> • Hotline: Emergency crisis services, information, and counseling available 24 hours a day, 7 days a week. • Shelter: A nine bed safe dwelling, providing shelter to female victims of domestic violence and/or sexual violence and their children for stays of up to 90 days. • Sexual Assault Forensic Exam (SAFE) Program: Provides for the collection of forensic evidence by specially trained nurse examiners in conjunction with Saratoga Hospital, for the purpose of aiding law enforcement and the DA's

	<p>office in successful prosecution. A rape crisis advocate is available throughout the exam.</p> <ul style="list-style-type: none"> • Individual Counseling: By appointment or on a walk-in basis. Counseling on issues and dynamics of domestic violence, physical and emotional reactions to sexual assault, safety plans, and exploring options. • Information and Referral: Accessing community resources and services. • Advocacy Services: Assistance with legal matters (filing charges, orders of protection, custody and child support petitions, accompaniment to police department, family and criminal courts), medical and therapeutic needs, education, employment, housing and children’s services. Some transportation assistance is available. • Legal Clinics: are offered bi-weekly and provide the opportunity for people who cannot afford an attorney to obtain an initial consultation with an attorney. Please contact 583-0280 to schedule an appointment. • Hope Support Group for Women: (Open Group) Weekly support group for women in crisis and at the beginning of making changes. • Children’s Services: Call for information on programs & services specifically designed for children. • Safe Pet Partnership: Provides a network of kennels, vets, pet foster homes, etc. for safe temporary placement of domestic violence victim’s animals. • Individual Case Management: Assistance in transitioning to safe and secure living through regular meetings, focusing on developing goals and working towards economic self-sufficiency. • Other Support and Educational Groups: Issue oriented groups on various topics are offered according to client need and staff availability. Call for more information. • Housing and Employment Counseling: Provided by our full time housing/employment specialist. • Community and Professional Education Training: Programs in family violence and sexual assault issues and prevention for schools, civic organizations, church groups, service providers and professionals. Specialized training is available for professional groups • Assists survivors of domestic violence or sexual assault • Information and linkage to treatment providers • Rent subsidized apartments for individuals/families with disabilities including mental health or substance use disorder
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